



MRTA

Missouri Retired Teachers and Education
Employees Association
573-634-4300
3030 DuPont Circle
Jefferson City, MO 65109
www.mrt.org

MRTA LOCAL UNIT I.R.S. TAX FILING REQUIREMENTS – _____ TAX YEAR

MRTA Unit Name: _____

Reporting Officer Name: _____
(please print)

- Option 1.** Our MRTA Local Unit does not have a bank account and had no income or expenses. Please sign and complete contact information at the bottom of the page.
- Option 2.** Our MRTA Local Unit wishes to report MRTA Local Unit transactions through the MRTA State Office (parent organization). **Please complete the bottom of this form and answer questions on page 2.**

NOTE: Your unit must be using MRTA's Federal I.D. Number to be able to report your unit's taxes through MRTA.

If you have more than ONE account (e.g., regular checking, savings account, scholarship fund), please use a separate form for EACH account.

- Option 3.** Our MRTA Local Unit will be filing a separate form 990 or 990N. We will not be reporting transactions to the MRTA State Office (parent organization). Please complete bottom of this form and return to the MRTA State Office.

Name of Officer Submitting Information: _____

MRTA Title: _____ Date: _____

Contact Phone #: _____

Contact Email: _____

TAX FORM MUST BE COMPLETED AND POSTMARKED TO MRTA STATE OFFICE, 3030 DUPONT CIRCLE, JEFFERSON CITY, MO 65109 BY MARCH 1.

MRTA, a 501(c)(4) not-for-profit corporation, is a grassroots advocacy association representing over 115,000 retirees with over 30,000 members.

MRTA is independent, nonpartisan, and does not endorse political candidates.



MRTA Local Unit I.R.S. Tax Filing Requirements – _____ Tax Year
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OPTION 2 REPORTING PORTION

MRTA Unit Name: _____

Our Unit provided grants in scholarships or grants last year: _____ yes _____ no
If yes, please indicate how many and the amounts:

Bank Balance January 1: _____

Statement of Income During the Tax Year

Can be consolidated by category:

Membership Dues Collected _____

Donations Received _____

Fundraisers _____

Interest Earned _____

Meeting/Meals/Activities Income _____

Other: _____

TOTAL INCOME: _____

Statement of Expenses During the Tax Year

Can be consolidated by category:

Donations Given _____

Scholarships Given _____

Meeting/Meals/Activities Expenses _____

Supplies (paper, printing, copying, postage, etc.) _____

Other: _____

TOTAL EXPENSES: _____

Bank Balance December 31: _____

*(Please note this example: January 1 Bank Balance **plus** Income **minus** Expenses = December 31 Bank Balance.)*

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