



# STATE TAX COMMISSION OF MISSOURI

P.O. BOX 146  
JEFFERSON CITY, MO 65102-0146  
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www.stc.mo.gov  
(573) 751-2414

## FORM 20

**Railroad Company**

TAX YEAR: **2012**

### Aggregate Statement of Taxable Property

| <b>This Form to be Completed by First-Time Filers ONLY!</b>                                       |  | <b>Account Number</b>  |  |
|---|--|--|--|
| <b>Company Information</b>  |  | <b>NEW</b>   |  |
| Company Name:   |  |  |  |
| 1. Address:   |  |  |  |
| 2. Address:   |  |  |  |
| City, State Zip Code:   |  |  |  |
| Contact:  |  |  |  |
| Title:  |  |  |  |
| Phone:  |  |  |  |
| Fax:  |  |  |  |
| email:  |  |  |  |
| <b>Notification / Correspondence</b>  |  | <i>(if different from Company Information)</i>                                   |  |
| Name:   |  |  |  |
| 1. Address:   |  |  |  |
| 2. Address:   |  |  |  |
| City, State Zip Code:   |  |  |  |
| Phone / Fax:  |  |  |  |
| email:  |  |  |  |
| <b>Billing Information</b>  |  | <i>(if different from Company Information and Notification / Correspondence)</i> |  |
| Name:   |  |  |  |
| 1. Address:   |  |  |  |
| 2. Address:   |  |  |  |
| City, State Zip Code:   |  |  |  |
| <b>Type of Business / Industry</b>  |  |  |  |
| <input type="checkbox"/> Telephone / Telecommunications   | <input type="checkbox"/> Electric Utility    | <input type="checkbox"/> Natural Gas Pipeline                                    | <input type="checkbox"/> Airline             |
| <input type="checkbox"/> Private Car  | <input checked="" type="checkbox"/> Railroad | <input type="checkbox"/> Product Pipeline  | <input type="checkbox"/> Commercial Aircraft |
| <b>Type of Ownership</b>  |  |  |  |
| <input type="checkbox"/> Sole Proprietorship  | <input type="checkbox"/> Partnership         | <input type="checkbox"/> Domestic Corporation                                    | <input type="checkbox"/> Subsidiary          |
| <input type="checkbox"/> Other  | <input type="checkbox"/> Cooperative         | <input type="checkbox"/> Foreign Corporation                                     | <input type="checkbox"/> Parent company      |
| <b>Description of Organization's Activities (include services rendered, products sold, etc.):</b> |  |  |  |
| <i>(Attach additional sheets if needed)</i>   |  |  |  |
|   |  |  |  |