Missouri Sales or Use Tax Exemption Application

Submit the listed items to ensure the Department of Revenue (Department) can process your exemption application. Submit all required information to avoid a delay or denial of your exemption letter. Federal or Missouri state agencies, Missouri political subdivisions, elementary and secondary schools operated at public expense, or schools of higher education are not required to furnish the documents below (see instructions).

Pursuant to Section <u>105.1500</u>, <u>RSMo</u>, the Department of Revenue is prohibited from requiring any entity exempt from federal income tax under Section 501(c) of the Internal Revenue Code, or any individual, to provide the Department with any list, record, register, registry, roll, roster, or other compilation of data of any kind that directly or indirectly identifies a person as a member, supporter, volunteer of, or donor of financial or nonfinancial support to, any entity exempt from federal income tax under Section 501(c) of the Internal Revenue Code. Nothing in this form should be read or understood as a requirement that you provide any such information. Notwithstanding any publication, webpage, form, instruction, regulation, or statement shared by the Department, you are not required to include such information on this form. If you encounter any technical difficulty in submitting this form without including information that you believe is protected by Section 105.1500, RSMo, feel free to contact the Department at the email, phone or address at the bottom of this form.

- Application A fully completed and signed Missouri Sales or Use Tax Exemption Application (Form 1746)
- Determination of Exemption A copy of IRS determination of exemption, Federal Form 501(c). Federal, state, Missouri political subdivisions or agencies, public elementary, secondary, or higher education schools or universities are not required to submit a Federal Form 501(c).
- Certificate of Incorporation or Registration A copy of the Certificate of Incorporation or Registration issued by the Missouri Secretary of State, if registered or incorporated
- Bylaws A copy of the organization's bylaws

MISSOURI DEPARTMENT OF

Form 1746

Required Information to Submit

IRS

Instructions

- Financial Statement A three-year financial statement (or number of years in existence if less than three) providing sources and amounts of
 income and expenses. A three-year financial statement is determined by the date of incorporation or the date the 501(c) exemption was issued.
- If the organization is less than six months old a projected budget for one year should be provided. The projected budget must include sources and amounts of income and expenses for one year.

The financial statement can be in the form of a spreadsheet, ledger book, or you may submit copies of all pages of the Internal Revenue Service (IRS) Return of Organization Exempt From Income Tax (Form 990). All schedules must include detailed information to avoid a delay in processing your application. The Department does not accept bank statements. If abbreviations are used, provide an explanation.

- Cooperative Marketing Association Attach the following:
 - Documentation verifying your payment of the annual registration fee;
 - A copy of the most recent annual report filed with the Missouri Secretary of State; and
 - A copy of the articles of incorporation that details that the corporation is organized as a nonprofit, non-stock corporation under Section 274.030 RSMo.

If you are registered with the IRS and have received a 501(c) letter, you must attach a copy of the most current letter of exemption issued to you by the IRS.

If you have not received an exemption letter from the IRS, you can obtain an Application for Recognition of Exemption (Form 1023) by visiting their website at *irs.gov* or call (877) 829-5500.

Missouri Tax I.D. Number

If you have been issued a Missouri Tax I.D. Number by the Department, enter that number in the space provided. Providing your Missouri Tax I.D. Number will ensure the Department registers your organization accurately.

Incorporated Organizations

If you are incorporated in Missouri, check "Missouri Corporation" and provide the required information. If you are an out-of-state corporation, and own property in Missouri, check the "Out-of-State Corporation" box and provide the required information.

Mailing Address

If correspondence should be mailed to an address other than the address of the organization or agency, provide the address to be used for mailing purposes (i.e., officer's, accountant's, or lawyer's address, etc.) P.O. Box may be used.

Record Storage

If the books and records are kept at an address (location) other than that of the organization, agency, or mailing address, provide the address.

Attachments

The attachments are used to determine whether an organization is exempt under Missouri law. Please remember to include all attachments pertaining to your organization. If you do not include all required attachments, it could result in a delay in issuing your exemption letter or a denial of your application.

Out of state organizations applying for a Missouri exemption letter must provide a copy of the sales and use tax exemption letter issued to the organization in their home state.



_1	Form REVENUE Department OF Department Use Only (MM/DD/YY)									
Misso	Missouri Tax I.D.									
Numb			I.D. Number							
Type of Exemption	Qualifying For Exemption As: (select one) Charitable (Benefits the common good and welfare of the community, not only within the organization, while relieving government of a financial burden that it would otherwise be required to meet) Religious (Churches, ministries, and religious groups. Exemption applies to sales and purchases only if within the organization's religious, charitable, or educational functions) Not-For-Profit Civic (Benefiting the citizenry at large on an unrestricted basis. Exemption applies only if the sale or purchase is made for the organization's civic or charitable functions and activities) Not-For-Profit Social, Service, Fraternal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Fraternal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Retarnal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Retarnal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Retarnal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Retarnal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Retarnal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Retarnal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social, Service, Retarnal (Exemption applies only if the sale or purchase is made for the organization) Not-For-Profit Social,									
Incorporated Organizations	Missouri Corporation Out-of-State Corporation	Missouri Charter Number	<u> </u>	Date Incorpo	/	0D/YYYY) /IM/DD/YYYY)	State of	Incorpo	ration	
	Organization Name Street Address - Do not use P.O. Box or Rural Route Phone Number									
me	Street Address - Do hot use		()							
ation Namo Address	City		State		ZIP Code		County			
Organiza and /	Website Address	E-mail Address								
õ	Does your organization own property in Missouri? 🗍 Yes 🗍 No									
Is your organization exempt from property tax? TYes No Date organization originated (MM/DD/YYYY)://										
	Does your organization make retail sale? 🗍 Yes 🗍 No If you answered "Yes", describe the frequency and type of sales you make.									
Mailing Address (If different than Organization Address)										
Mailing Address	Street Address or P.O. Box									
Mailir	City		State		ZIP Code		County			

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	•	•	



	Record Storage Address (De not use D.O. Rev or Dural Revite)									
age	Record Storage Address (Do not use P.O. Box or Rural Route)									
d Sto	Street Address (Do not use P.O. Box or Rural Route)									
Record Storage	City			State				County		
ш.										
Organization or Agency Officers	Name (Last, First, Middle Initial) Title		S	Social Security Number		Birthdat		te (MM/DD/YYYY)		
								/		
i or a :ers	Street Address			City State					ZIP Code	
Offic	Name (Last, First, Middle Initial) Title		S	ocial Security N	cial Security Number Birtho			late (MM/DD/YYYY)		
aniz							/_	/		
Ê D	Street Address			City				State	ZIP Code	
uo	In one or two brief statements, summarize the	primary organizati	onal purp	ose and the ma	in activiti	es. Explain th	e intended	use of the	exemption	
zati	letter.	p								
Description of Organization										
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		Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct; that the present nature, purpose and activities of the above-named organization or agency are the same as they were when the attached documents were issued								
	and will continue to remain the same; that I will remain knowledgeable of the statutes and regulations governing sales or use tax exemptions and									
	that I will immediately notify the Department of any change in circumstances which could reasonably lead me to believe that the above-named organization or agency would no longer qualify as exempt, either because of a change in the law or because of a material change in the									
	organization's or agency's nature, purpose, or activities.									
re	It is understood that any misrepresentation contained herein or failure on my part to fulfill the promises entered into here will result in the immediate revocation of any exemption letter issued to this organization or agency.									
Signature	An officer, member, or responsible person must sign the application. If a power of attorney signs the application, you must include a Power of Attorney (Form 2827) signed by an officer, member, or responsible person listed on the application.									
Siç	Signature of Officer or Responsible Person			Title						
	Printed Name			E-mail Address						
	Social Security Number Date of Birth (MM/D			Date (MM/DD/YYYY)						
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IdX	Missouri Statute <u>32.057, RSMo</u> , states that all tax records and information maintained by the Department are confidential. The tax information									
ls Is	can only be given to the owner, partner, member, or officer who is listed with us as such. If you wish to give an employee, attorney, or accountant access to your tax information, you must supply us with a power of attorney giving us the authority to release confidential information									
Records	to them.									
	If your officers, members, or responsible persons change, you must update your registration with the Department by completing a Registration or									
Confid	Exemption Change Request (Form 126), before we can release tax information to those new officers, members, or responsible persons.									
<u>ر</u>										

E-mail: <u>salestaxexemptions@dor.mo.gov</u>

Form 1746 (Revised 09-2022)

P.O. Box 358 Jefferson City, MO 65105-0358

 Phone:
 (573) 751-2836

 Fax:
 (573) 522-1666

 TTY:
 (800) 735-2966

Mail to: Taxation Division



Visit <u>dor.mo.gov/taxation/business/tax-types/sales-use/</u> for additional information. Ever served on active duty in the United States Armed Forces?

If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u>.

