	orm	Annual 2 25 Percei	NUZ 5% EED				Returi	ו —		artment (DD/YY)	Re	porting M/YY)	Period				
Missou Numbe	ri Tax I.D.								ederal Employe D. Number	r							
Owne	r's Name								Business Name	Э							
Mailin	g Address					City				State	ZIP Co	de	Due Da				
Busine	ess Phone Nu	mber	Select	box if	Addres	ss Corre	ction:				Select	one if:	Ji	anu	ary 31	, 2025	5
()		change	number ed	🗖 Mai	iling Add	lress	Bus	siness Location					_	Additiona	al Retu	'n
		Business L	ocation				Code		Taxable L	Itility Pu	urchases	F	Rate (%)	_	Amou	unt Of 7	Гах
Drior t	o lonuoru 1 2	0000			Full R	late								_			
	o January 1, 2	Aanufacturir	na exempti	on (loc:	al tax or	nlv)											
		landidotani	ig oxompti			,								_			
Tota	als														1.		
							Subtra	ct: 2%	% timely payme	ent allo	wance (it	applic	able)		2. –		
							Total s	ales	tax due						3. =		
									at for late paym					t I	4. +		
									ons to tax								
									proved credit						6. – 7. =		
						l	Pay Ir	IIS AI	nount (U.S. Fu	nas Or	11y)				7.=		
coverable Materials Content	materials in e period. Recor Select applica	each produc vered Mater able box:	t as defined als Qualify 25%-3 30% or In acco manufa	d in <u>Sec</u> ing Proc 0% reco higher ordance acture o	ction 26 duct % overed r with las with <u>Se</u> f autom	material at audit a ection 1 obiles co	RSMo. N — obtain nd 30% c 44.030.2 ontain at l	o sigr vend or high (12), least t	(s) referenced a nificant product t (If multiple proceed for declaration states for current per RSMO , rebuttab wenty-five perceed (for the full states of the stat	ype or i luct line atemen eriod in le presu ent reco	ingredient s, attach p nts, fill out recovered umption th vered mat	change bercenta Part B, materia	es have d age inform Recovere al conten	nati ed N	nred for t on for ead Aaterial C	he repo ch.) alculati	orting
- Re	Signature	tion stateme	ent must be	e signe	d and d	ated by	an autho		official of the c	ompany	y.			ate	(MM/DD		
Part A - Re	olghatare														_//		
Ра	Product or Pr	roducts Pro	duced														
	Complete S	Section B c	only if you	check	ked the	first ch	eck bo	k in F	Part A (25–30%	% reco	vered m	aterial)					
erial	List all raw	material s	uppliers a	nd per	rcentag	ge of re	covered	l mat	erial content r	necess	ary to qu	ualify fo	or the e	xen	nption.		
ed Mate IIs	Name o Material S		Raw	scription Materia	al	B - Total or Volu	Weight me (1)		% of Recovered Material (2)		Neight or overed M				Recover tal Raw M		
vere		_	Attach a d	detailed I	listing					<u>4 A</u>	<u>AP</u>	4-4					
Reco v Ma		Tota															%
Part B - Calculation of Recovered Material Content in Raw Materials	 case, you (2) This representation (3) Multiply the complete (4) Divide and (5) Check Fig. 	u must use the p the Manufa he amount in nounts in Co gure: Total	ne same ur ercent of re cturers Dee n Column E lumn D by of Column	hit of me ecovere claratior 3 by the the tota D divide	easure (ed mater n of Rec percen al of Col ed by Co	(pounds, rials in th covered tage in (lumn B. olumn B	ounces, ne raw ma Material Column C (This nu	feet o ateria Conte C. mber	erials. In either or inches). Is. Obtain this in ent (<u>Form 5021</u>) should equal th ption for the ne	. These e total fe	forms sho or Columr	ly from ould be n E.)	your sup maintain	ed v	with your	records	5.
Ë		you also q	ualify for t	his exe ate tax	emption to the D	.) If you Departm	do not ent of Re	qualif evenu	fy, it is your re	sponsib	pility to no						

14007010001	

											Miss	ouri Tax Iden	tification Numb	er
								1						
I	Number of Units	Description of Exempt Electrical Equipment	Hours Per Day (run-time)	Days Per Week	Weeks Per Year	Phase	Amp Draws	Volts	HP	Wattage from VA	Wattage from HP	Estimated Hours Used Annually Per Unit	Estimated Hours Used Annually X No. of Units	KWH Per Year
ith KW sary)						_	\sim				_			
ing wi ecess		Attach a detailed listing						AI	VI	ΓL				
it Listi ng if n													Total KWH	
e Equipmer pment listi	are for	calculate the hours us the purpose of calcu litional exempt electric	lating the	e exe	mption	unde	r Secti	ion 144						
Part C - Attach Your Taxable Equipment Listing with KWH Usage (and exempt equipment listing if necessary)	manufa proces subsec	n 144.030.2(12), RSM acturing, processing, co sing or fabricating of tion, in facilities owner five percent recovered	ompound the proo d or leas	ing, m duct, ed by	ining o or a n / the ta	or prod nateria axpaye	ucing I reco er, i	of a pro very p f the ra	oduct roces aw m	, or electr ssing pla aterials ι	rical ene nt as de	ergy used in efined in su	the actual se Ibdivision (4	condary) of this
Part C - Atta Usage (a	in the proces	144.054.2, RSMo, e manufacturing, proce sing of recovered t usage per Section	essing, o materia	compo Is	oundin ." If t	ig, mii total	ning, o exemp	or proc ot elec	ducin	g of any ty after	produc taking	t or used into acco	or consume unt the ad	d in the ditional

Section 144.054.2, RSMo, effective August 28, 2007, exempts from state sales tax "electrical energy used or consumed in the manufacturing, processing, compounding, mining, or producing of any product or used or consumed in the processing of recovered materials" If total exempt electricity after taking into account the additional exempt usage per Section 144.054.2, RSMo, is at least 76% of total usage, the electricity is 100% exempt from state tax. Therefore, electricity that does not qualify for the state and local sales tax exemption under Section 144.030.2(12), RSMo, is subject to local sales tax only.

Please note that as of January 1, 2023 the exemption under Section 144.054, RSMo exempts both state and local sales taxes.

on of ity Used	Estimated Usage		KWH	Percentage
nputation Electricity	A. Total Electricity Used (taken from suppliers bills)	А		100%
t D - Comp tage of El	B. Taxable Electricity Used	в	(Part C Total)	(B÷A)
Part l ercenta	C. Exempt Electricity Used	с	(A–B)	(C÷A)

Final Return: If this is your final return, enter the close date below and select the reason for closing your account. The Sales Tax law requires any person selling or discontinuing business to make a final sales tax return within fifteen (15) days of the sale or closing. Date Business Closed:

Out of Business

Sold Business

Leased Business

Complete Part E, Page 3, prior to signing the return.

If you do not qualify, it is your responsibility to notify your utility provider, withdraw your exemption, and remit the appropriate tax to the state. Under penalties of perjury, I declare that I have direct control, supervision or responsibility for completing this return. I attest that I have no taxable utility purchases to report for locations left blank.

> If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid may be presented again electronically.

Sign and Date Return: This must be signed and dated by the taxpayer or by the taxpayer's authorized agent.

Signature of Taxpayer or Agent		Print Name	le
Title	Date Signed (MM/	DD/YYYY)	Tax Period (MM/DD/YYYY) Thru (MM/DD/YYYY)
	1 1		/ / Thru / /



រ ប័	olumn 4 is obta	Column 4 is obtained by multiplying Column 2 by the taxable percentage in Part D.	g Column 2	by the exempt by the taxable	Column 3 is obtained by multiplying Column 2 by the exempt percentage in Part D Column 4 is obtained by multiplying Column 2 by the taxable percentage in Part D.	n Part D. I Part D.	Column 7 is Column 8 is	obtained by s obtained by s	subtracting (5A subtracting (5B	Column 7 is obtained by subtracting (5A + 6A) from 4A. Column 8 is obtained by subtracting (5B + 6B) from 4B.	
				Billing Portion On Which Sales Tax Is Due Taxable Equipment	In Which Sales	Billing Portion (Tax Was Paid	Billing Portion On Which Sales Tax Was Paid to Suppliers	Taxable	Taxable Amount Previously Reported		
Period By Month	1. Total KWH Billed	2. Total Billing 3. F Exclusive f of Sales Tax	. Billing Portion for Exempt Equipment	4a. At Full Tax Rate	4b. At Local Only Tax Rate	5a. At Full Tax Rate	5b. At Local Tax Rate	6a. At Full Tax Rate	6b. At Local Tax Rate	7. Taxable Balance to be Reported on Page 1 (Full Rate)	8. Local Only Taxable Balance to be Reported on Page 1
January											
February											
March											
April											
May											
June											
July											
August											
September											
October											
November											
December											
Total		\$		\$	\$	\$	\$	\$	\$	\$	\$
ase no sumes gust 27 iount of	ote that colum that the elec , 2007. If not, electricity to r	Please note that columns 4b, 5b, 6b, and 8 are for reporting the partial exemption authorized under Section 144.054, RSMo prior to January 1, 2023. This form presumes that the electricity used in manufacturing under Section 144.054.2, RSMo for and therefore, 100% exempt from state tax after August 27, 2007. If not, then additional calculations not shown here are necessary to determine the amount of electricity to report subject to the full sales tax rate and the amount of electricity to report subject to the local tax rate only. If you have any the electricity to report subject to the local tax rate only. If you have any the amount of electricity to report subject to the local tax rate and the amount of electricity to report subject to the local tax rate only. If you have any questions, please contact the Department of Revenue at (573) 751-2836.	nd 8 are for nufacturing Iculations no e local tax n	r reporting th∈ under Section ot shown here ate only. If you	Partial exem 144.054.2, R are necessary have any que	g the partial exemption authorized under Section 144.054, RSMo prior to January 1, ction 144.054.2, RSMo is at least 76% of total usage and therefore, 100% exempt fro here are necessary to determine the amount of electricity to report subject to the full sale. If you have any questions, please contact the Department of Revenue at (573) 751-2836.	ed under Sec st 76% of tot: the amount of contact the D	tion 144.054, al usage and electricity to r epartment of	, RSMo prior therefore, 100 eport subject Revenue at (5	g the partial exemption authorized under Section 144.054, RSMo prior to January 1, 2023. This form ction 144.054.2, RSMo is at least 76% of total usage and therefore, 100% exempt from state tax after here are necessary to determine the amount of electricity to report subject to the full sales tax rate and the If you have any questions, please contact the Department of Revenue at (573) 751-2836.	023. This for state tax aft tax rate and th
Mail to:	Taxation Division P.O. Box 840 Jefferson City, M(Taxation Division P.O. Box 840 Jefferson City, MO 65105-0840		E-mail: <u>businesstaxprocessing@dor.mo.gov</u> Ever served on active duty in the United If yes, visit <u>dor.mo.gov/military/</u> to see the services an	rocessing@d ve duty in th litary to see the	E-mail: <u>businesstaxprocessing@dor.mo.gov</u> 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	ates Armed			Form 53-E	Form 53-E25 (Revised 12-2024)
Phone: Fax:	(573) 751-2836 (573) 522-1666	36 36	veteranbe	minitary individuals. A list of all state agend veteranbenefits.mo.gov/state-benefits/	or all state agent /state-benefits/.	military individuals. A list of all state agency resources and penelits can be found at veteranbenefits.mo.gov/state-benefits/.	a penelits can p			14007030001	

Missouri Tax Account Number

Page 3

Part E - Determination of Exempt and Taxable Purchases