| _[| Form Missouri Department of Revenue MO-851 Affiliations Schedule | Department Use Only (MM/DD/YY) | | |
|----------------------------------|---|-----------------------------------|-------|----------|
| | Taxable Year Beginning (MM/DD/YY) | Ending (MM/DD/YY) | | |
| tion | | Federal Employer I.D. Number | | |
| Common Parent Corporation | Charter Number | | | |
| on Pare | Name | | | |
| Commo | Number and Street | City | State | ZIP Code |

This form must be completed by the parent corporation for itself and for corporations in the affiliated group. File Form MO-851 by attaching it to the Missouri consolidated tax return for the group.

| | Name and Address of Corporation | | Payments | | | | |
|--------|---------------------------------|---------------------------------------|--|--------------------------------------|--|--|--|
| No. | | Missouri Tax Identification Number | Portion of Form MO-7004 Tax Payment | Portion of Estimated Tax Payments | | | |
| | Common Parent Corporation | | | | | | |
| Subsid | Ibsidiary Corporations: | | | | | | |
| 1 | | | | | | | |
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| 14 | | | | | | | |

Additional forms may be used, if necessary.

Mail to: Taxation Division P.O. Box 3365 Jefferson City, MO 65105-3365 Phone: (573) 751-4541 Visit http://www.dor.mo.gov/business/corporate/ Fax: (573) 522-1721 E-mail: corporate@dor.mo.gov

Form MO-851 (Revised 12-2016)

for additional information.



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