Form Missouri Department of Revenue	Department Use Only
1746R Sales or Use Tax Exemption Renewal Applic	(MM/DD/YY)
Missouri Tax I.D. Number	Federal Employer

To complete your application to renew your sales or use tax exemption you must:

- Fully complete and submit Form 1746R.
- Attach a complete financial history for the last three years (or number of years in existence if less than three) indicating sources and amounts of income and a breakdown of expenditures.
- Provide a written description of the organization's civic or charitable activities. Please be specific and provide examples.

	Organization Name										
Organization Name and Address	Street Address - Do not use P.O. Box or Rural Route					Ph (Phone Number				
	City		State			Zip	Code		County		
	Website Address		E-mail Address								
	Does your organization own property in Missouri? Yes No Is your organization exempt from property tax? Yes No Date organization originated (MM/DD/YYYY):///										
orated zations	Missouri Charter Number			Date Incorporated (MM/DD/YYYY) / / / /							
Incorporated Organizations	Out-of-State Corporation Missouri Certificate of Authority Number Date Registered in Missouri (MM/DD/YYYY) State of Indiana						•				
lress	Mailing Address (If different than Organization Address)										
Mailing Address	Street Address or P.O. Box										
Maili	City		State				Zip	Code		County	
		1									
ency	Name (Last, First, Middle Initial)	Title	Socia	Social Security Numbe		umber			Birthdate (MM/DD/YYYY)		
Organization or Agency Officers	Street Address			City			State	Zip Code			
nization Offic	Name (Last, First, Middle Initial)	Title	Socia	Social Security Number				Birthdat		e (MM/DD/YYY)	
Orgar	Street Address	1		City	1	, ,		1		State	Zip Code



Under penalties of perjury, I declare that:

- The above information and attachments are true and correct.
- I will keep informed of legislative changes and review the law to ensure the organization is in compliance.
- The organization's activities and purpose are the same as when the exemption was originally issued.

Signature of Officer or Responsible Person		Title					
Printed Name		E-mail Address					
Social Security Number	Date of Birth (MM/DD/YYYY)		Date (MM/DD/YYYY)				
	///		//				

Missouri <u>Statute 32.057, RSMo</u>, states that all tax records and information maintained by the Missouri Department of Revenue are confidential. The tax information 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 to them.

Form 1746R (Revised 12-2014)

Mail to: Taxation Division P.O. Box 358 Jefferson City, MO 65105-0358 Phone: (573) 751-2836 TDD: (800) 735-2966 Fax: (573) 751-9409 E-mail: salestaxexem

Visit <u>http://www.dor.mo.gov/business/sales/</u> for additional information.

E-mail: salestaxexemptions@dor.mo.gov



14014020001