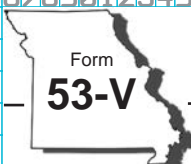


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Form 53-V Missouri Department of Revenue Vendor's Use Tax Return

Select this box if return is amended

Department Use Only (MM/DD/YY) [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

In the event your mailing address, primary business location, or a reporting location changed, please complete the Registration Change Request (Form 126) and submit with your return.

Filing Frequency [ ] [ ] PIN [ ] [ ] [ ] [ ] Due Date (MM/DD/YY) [ ] [ ] [ ] [ ] [ ] [ ]

Missouri Tax I.D. Number [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Federal Employer I.D. Number [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Reporting Period (MM/YY) [ ] [ ] [ ] [ ]  
Owner Name [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Business Name [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
Address [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] City [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] State [ ] [ ] ZIP Code [ ] [ ] [ ] [ ] [ ] [ ]

| Totals For This Return   |  | Gross Receipts  | Adjustments (Indicate + or -) | Taxable Sales | Amount of Tax                                       |
|--|--|---|-------------------------------|---------------|---|
| 1. Totals (All Pages) .....  |  | .   | .                             | .             | .   |
| <b>Provide Tax Breakdown Starting With Page Two</b>  |  |   |                               |               |   |
| You must provide a breakdown of tax, by location and item, on page two. If a breakdown is not provided your filing will be considered incomplete and may be subject to penalties and interest. Attach additional pages if necessary. |  | 2. Subtract: 2% timely payment allowance (if applicable) ..... - .    |                               |               |   |
| <input type="checkbox"/> Select this box if you have added new locations   |  | 3. Subtract: Approved credit ..... - .                                |                               |               |   |
| <b>Final Return</b>  |  | 4. Balance Due ..... = .  |                               |               |   |
| If this is your final return, enter the close date below and check the reason for closing your account.  |  | 5. Add: Interest for late payments (See Line 5 instructions)..... + . |                               |               |   |
| Date Closed (MM/DD/YY) [ ] [ ] [ ] [ ] [ ] [ ]   |  | 6. Add: Additions to tax..... + .                                     |                               |               |   |
| <input type="checkbox"/> Out of Business <input type="checkbox"/> Sold Business  |  | 7. Pay this amount (U.S. funds only) ..... = .                        |                               |               |   |
|  |  |   |                               |               | Department Use Only [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] |

By signing this return I am authorizing the Department of Revenue to issue any potential refund(s). Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct. I have direct control, supervision, or responsibility for filing this return and payment of the tax due. I attest that I have no gross receipts to report for locations left blank.

Taxpayer or Authorized Agent's Signature [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Printed Name [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Title [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

E-mail Address [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Telephone Number [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Date Signed (MM/DD/YY) [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

Mail to: Taxation Division P.O. Box 840 Jefferson City, MO 65105-0840

Phone: (573) 751-2836 TTY: (800) 735-2966 Fax: (573) 526-8747 E-mail: salesuse@dor.mo.gov

Visit https://dors.mo.gov/tax/busefile/login.jsp to file your use tax return electronically.

Form 53-V (Revised 07-2017) 14005010001

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04 Missouri Tax I.D. Number

Reporting Period (MM/YY)



14005020001

Page of

| Close | Business Location<br>(Street Address and City) | Jurisdiction Code<br>(City, County, and District) | Item<br>Code | Site<br>Code | Gross<br>Receipts | Adjustments<br>(Indicate + or -) | Taxable Sales | Tax Rate (Do not<br>include % symbol) | Amount of Tax |
|-------|--|---|--------------|--------------|-------------------|----------------------------------|---------------|---------------------------------------|---------------|
|-------|--|---|--------------|--------------|-------------------|----------------------------------|---------------|---------------------------------------|---------------|

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47 Page -- Totals.....

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