



MISSOURI DEPARTMENT OF

REVENUE

Business Activity Questionnaire

Department Use Only
(MM/DD/YY)

Missouri Tax I.D.
Number

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Federal Employer
I.D. Number

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Charter
Number[illegible]

Name of Business		E-mail	
Mailing Address			
City		State	ZIP Code
Business Telephone Number (____) _____ - _____	Ownership Type	Date of Incorporation ____ / ____ / ____	State of Primary Business Location
State of Incorporation	Nature of Business Activity in Missouri		Date Activity Began in Missouri ____ / ____ / ____
Other States that the Company Conducts Business in			

For the purpose of this questionnaire, "representative" includes employees, agents, independent contractors, brokers, others acting on your behalf, and any other person residing in this state who directly or indirectly refers potential customers to you for a commission or other form of consideration by any means, including, but not limited to, linking your business to the person's internet website, making in-person oral presentations, or engaging in telemarketing.

1. Amount of gross receipts from the sale of tangible or intangible personal property or services during the last five years:

Year Ended	From Points in Missouri to points in Missouri	From Points in Missouri to points outside Missouri	From Points outside Missouri to points in Missouri
20__ __	\$	\$	\$
20__ __	\$	\$	\$
20__ __	\$	\$	\$
20__ __	\$	\$	\$
20__ __	\$	\$	\$

2. How are sales made in Missouri? ☐ Internet ☐ Representative ☐ Telephone ☐ Other:

3. How are deliveries made into Missouri? ☐ By common carrier ☐ By your vehicles

If by your vehicles, indicate if such vehicles are: ☒ Owned ☐ Leased

Are the vehicles used to back-haul items from Missouri after delivery? ☐ Yes ☐ No

4. Have returns been filed with Missouri for any prior years by your business or any affiliated entity using its present name or another name? ☐ Yes ☐ No

If yes, what name(s) and Missouri Identification Number(s)

5. Is your business the survivor of a merger, sale of assets, partial or complete liquidation or other dissolution of a business in Missouri? ☐ Yes ☐ No

6. Does your business or any affiliated entity currently have, or has it had at any time, in Missouri an:

☐ Office ☐ Agent ☐ Warehouse ☐ Place of Distribution ☐ Sample or Sample Room/Place ☐ Other place of busniess

If yes, please provide the following information for each place (use additional sheets if necessary):

a) Location:

b) Approximate beginning date and end date (if applicable) of operation:

Begin Date (MM/DD/YYYY) - End Date (MM/DD/YYYY) N/A



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- a) Identification of representatives:

d) How is remuneration made to the representative (commission only, salary and commission, expense allowance, etc.)?

21. Does any representative of your business or any affiliated entity reside in or enter into Missouri to:

- | | | |
|---|------------------------------|-----------------------------|
| a) Collect on current or delinquent accounts? | ☐ Yes | ☐ No |
| b) Accept installment payments? | ☐ Yes | ☐ No |
| c) Make adjustments for returned or damaged merchandise? | ☐ Yes | ☐ No |
| d) Investigate or authorize credit of existing or potential customers? | ☐ Yes | ☐ No |
| e) Investigate customer's complaints? | ☐ Yes | ☐ No |
| f) Authorize warranty work or replacement of merchandise? | ☐ Yes | ☐ No |
| g) Receive purchase orders when calling upon a customer? | ☐ Yes | ☐ No |
| (If yes, do they have authority to approve or reject the order?) | ☐ Yes | ☐ No |
| h) Pick up or replace returned, damaged or out-of-date merchandise from customers? | ☐ Yes | ☐ No |
| i) Make "on the spot" sales to customers? | ☐ Yes | ☐ No |
| j) Distribute or carry any type of samples, brochures, etc.? | ☐ Yes | ☐ No |
| k) Inspect the marketing of your products or any use of your trademarks or trade names? | ☐ Yes | ☐ No |
| l) Accept deposits or down payments? | ☐ Yes | ☐ No |
| m) Repossess products? | ☐ Yes | ☐ No |
| n) Solicit sales or take orders? | ☐ Yes | ☐ No |

22. Does any representative of your business or any affiliated entity maintain an office of any kind, either in a home or elsewhere, within Missouri? ☐ Yes ☐ No

If yes, do they:

- a) Store inventory there? ☐ Yes ☐ No
- b) Store samples for more than two weeks (14 days) at any location within Missouri? ☐ Yes ☐ No
- c) Have a telephone listing under the company's name? ☐ Yes ☐ No
- d) Receive any office expense reimbursement from the company? ☐ Yes ☐ No



23. Does any representative of your business or any affiliated entity assist dealers or other customers in any of the following ways in Missouri:
- a) Provide training in the sale, service, or use of your product? ☐ Yes ☐ No
Explain: _____
- b) Organize sales promotions? ☐ Yes ☐ No
- c) Call on customers accompanied by dealers' salesmen? ☐ Yes ☐ No
Explain: _____
- d) Set up merchandise or advertising displays? ☐ Yes ☐ No
- e) Hold meetings, conduct lectures, training courses, or seminars for personnel other than those involved only in solicitation of tangible personal property? ☐ Yes ☐ No
- f) Promote or demonstrate your or your affiliated entities' products or services for personnel other than those involved only in solicitation of tangible personal property? ☐ Yes ☐ No
24. What type of customers or prospects do the representatives of your business or any affiliated entity call on (i.e., wholesalers, retailers, industries, home, etc.)? _____
25. How do your business or affiliated entity customers in Missouri transmit their purchase orders?
- a) By Mail ☐ Yes ☐ No
- b) By handing it to a representative ☐ Yes ☐ No
- c) Electronically ☐ Yes ☐ No
- d) Other: _____
26. If your business or affiliated entity representatives' duties have not been fully covered in the items above, please add sufficient further description of the duties performed. _____
27. Does your business or any affiliated entity service or repair equipment or property of customers in Missouri? ☐ Yes ☐ No
28. Does your business or any affiliated entity perform any installation or construction work within Missouri? ☐ Yes ☐ No
29. Does your business or any affiliated entity supervise or inspect the installation of products at or after shipment or delivery in Missouri? ☐ Yes ☐ No
30. Amount of salaries, commissions, or wages paid for services performed by representatives or affiliated entities in the previous five years:

Total Year Ending	Total Everywhere	Total Missouri
20__	\$	\$
20__	\$	\$
20__	\$	\$
20__	\$	\$
20__	\$	\$

31. Names, addresses, and social security numbers or Federal I.D. numbers of the five highest paid representatives of your business or affiliated entity who reside in or enter into Missouri:

Name	Address	Social Security Number of Federal Identification Number (required)



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32. List names and addresses of the five largest customers in Missouri of your business or any affiliated entity:

Name	Address

33. Enclose a signed copy of the front page of your Federal Form 1120, include Form 851 if a consolidated return, for the last five years as reported to the Internal Revenue Service. If you file Form 1065 or 1120S, include the entire form and all K-1 Schedule(s) of every partner, member, or shareholder for the last five years as reported to the Internal Revenue Service.

Additional space for explanations. Please refer to questions by number. A separate sheet may be used if additional space is needed.

Under penalties of perjury, I declare that I have examined this business activity questionnaire, including accompanying returns, forms, schedules, and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based upon all information of which he or she has knowledge.

Signature of Preparer	Printed Name	Title	Date (MM/DD/YYYY) ____/____/____
Signature of Officer	Printed Name	Title	Date (MM/DD/YYYY) ____/____/____

Mail to: Taxation Division
P.O. Box 295
Jefferson City, MO 65105-0295

E-mail: nexus@dor.mo.gov

Form 4458 (Revised 03-2016)

Visit dor.mo.gov/taxation/business/ for additional information.

Phone: (573) 522-4989
Fax: (573) 522-1762



Ever served on active duty in the United States Armed Forces?

If yes, visit dor.mo.gov/military/ 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 veteranbenefits.mo.gov/state-benefits/.

