



MISSOURI DEPARTMENT OF REVENUE Business Activity Questionnaire

Department Use Only (MM/DD/YY)

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Missouri Tax I.D. Number

Grid for Missouri Tax I.D. Number

Federal Employer I.D. Number

Grid for Federal Employer I.D. Number

Charter Number

Grid for Charter Number

Main business information form with fields for 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, and 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:

Table with 4 columns: Year Ended, From Points in Missouri to points in Missouri, From Points in Missouri to points outside Missouri, and From Points outside Missouri to points in Missouri. Rows for years 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 business

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: ____/____/____ - ____/____/____ [] N/A



- c) Nature of business activity: _____
- d) Telephone number listed in a directory or any toll free number for use by callers in Missouri: (____) _____-_____
- e) Websites: _____

7. Does your business or any affiliated entity currently use, maintain, lease, own, rent, or hold title to, or in the past, used, maintained, leased, owned, rented, or held title to, any tangible property located in Missouri? Yes No

If yes, briefly describe the property, and state the year(s) it was in Missouri: _____

Name the entity or entities which owned, leased, or otherwise utilized property in Missouri. _____

8. Value of real or tangible personal property held by the business or affiliated entity in Missouri for the last five years:

	20__ __	20__ __	20__ __	20__ __	20__ __
Inventory	\$	\$	\$	\$	\$
Other Property	\$	\$	\$	\$	\$
Rental Property (annual)	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

- a) Address where inventory in Missouri is or was located: _____
- b) Address and description of other property in Missouri: _____
- c) Address and telephone number of all offices, displays, or sample rooms your business or any affiliated entity maintains or maintained in Missouri: _____

9. Has your business or affiliated entity licensed intangible property for use in Missouri?

Location	Date (MM/DD/YYYY)	Description

10. Has your business conducted any type of research or testing in Missouri, either by your business or through an affiliated entity or representative? Yes No
11. Does your business or affiliated entity maintain a bank account in Missouri? Yes No
12. Does your business or affiliated entity currently have or has it ever had a security interest in any real or personal property sold or located in Missouri? Yes No
13. Has your business extended credit or financial services to any entity in Missouri? This includes issuing credit cards, debit cards, charge cards, making loans, and accepting mortgages to secure loans. Yes No
14. Does your business or any affiliated entity currently own or has it ever owned advertising material directed to potential customers in Missouri? (If yes, attach a copy.) Yes No
15. Is your business or any affiliated entity listed in any telephone or building directory in Missouri? (If yes, attach a copy.) Yes No
16. Does your business or any affiliated entity currently engage or has it engaged in any advertising (cooperative or otherwise) directed to potential customers in Missouri? Yes No
17. Does your business have no physical presence in Missouri, but have gross receipts from taxable sales of tangible personal property in Missouri that exceed \$100,000 in a year? Yes No
18. Does your business facilitate sales on behalf of third parties? Yes No
- If yes, are your gross receipts from taxable sales of tangible personal property into Missouri exceed \$100,000 a year? Yes No
19. Has your business or any affiliated entity had representatives whom directly or indirectly referred potential customers to your business for a commission or other consideration, whether by a link on an internet website, an in-person oral presentation, telemarketing, or otherwise? Yes No

If yes, explain: _____

20. Have any contracts been signed by your business or any affiliated entity directed to potential customers in Missouri? Yes No

(If yes, attach a copy and give detailed location, dates, and value of contract(s) _____

21. Has your business or any affiliated entity had representatives performing services; including but not limited to delivery, installation, assembly, maintenance, or making calls upon customers or clients within Missouri? Yes No

If such representatives are or were engaged in facilitating delivery of property to customers in Missouri, did they allow the customers to pick up property sold by the vendor at an office, distribution facility, warehouse, storage place, or similar place of business maintained by the person in Missouri? Yes No

If such representatives are or were conducting any other activities in Missouri that are significantly associated with the vendor's ability to establish and maintain a sales market in Missouri, please explain _____

If such representative are or were engaged in some form of sales, promotional, or service work on your behalf, please provide the following information:

a) Identification of representatives:

Name and Address	Territory Covered	Designation of Representative	Year(s)

b) Does your business or any affiliated entity have a standard form of written agreement with representatives? (If yes, attach a copy.) Yes No

c) Does the representative sell or represent other lines of merchandise other than yours or your affiliated entities? Yes No

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

22. Does your business or any affiliated entity maintain or have a franchisee or licensee operating under the seller's trade name in Missouri? Yes No

23. 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

24. 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



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25. 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

26. 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.)?

27. 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: _____

28. 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. _____

- 29. Does your business or any affiliated entity service or repair equipment or property of customers in Missouri? Yes No
- 30. Does your business or any affiliated entity perform any installation or construction work within Missouri? Yes No
- 31. Does your business or any affiliated entity supervise or inspect the installation of products at or after shipment or delivery in Missouri? Yes No

32. 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__ __	\$	\$

33. 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)



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

Name	Address

35. 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 05-2023)

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/.



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