The court of the c				
TAXPAYER(S)/BUSINESS NAME (IF FILING MISSOURI JOINT INCOME TAX RETURNS, BOTH SPOL	JSES' NAMES MUST BE LIST	TED.)	TAXPAYER TELE	EPHONE NUMBER
TAXPAYER(S) ADDRESS (INCLUDE STREET, CITY, STATE, ZIP)				
TAXPAYER IDENTIFICATION NUMBER (SOCIAL SECURITY NUMBER(S) - INCLUDE FOR ALL NAME	S LISTED ABOVE)	DATE OF DONAT	ION	
AMOUNT OF DONATION (ATTACH PROOF OF DONATION, SEE INSTRUCTIONS)	AMOUNT OF TAX CREDIT	(50% OF THE DON	NATION)	
TAXPAYER TYPE (*REQUIRES SUPPORTING DOCUMENTATION - SEE INSTRUCTIONS)	1			
	LLC* CHARITABLE C	DRGANIZATION*		L INSTITUTION CE COMPANY
DOMESTIC VIOLENCE SHELTER OR RAPE CRISIS CENTER RECEIVING THE CONTRIBUTION				
ADDRESS				
TELEPHONE NUMBER	CONTACT PERSON			
Domestic Violence Shelter or Rape Crisis Center Tax Credit Crit Cannot exceed the taxpayer's state income tax liability for the year. The taxpayer can not claim credits under this program in excess. The tax credit may be carried over for four years until the full crede. The maximum amount of eligible tax credit issued may be the equal Contributions can not be less than \$100. Total tax credits issued under this program may not exceed the another transfer to the credits will be issued in the order they are received. Application must be received by the Department of Social Services. Application must be received by the Department of Social Services. In accordance with section 135.550, RSMo, I certify that the information or Rape Crisis Center the criteria established for the Domestic Violenthe amount of the tax credit issued by the Missouri Department of outstanding balance owed to the Missouri Department of Revenue (social Service) I certify that I am authorized to work in the United States and eligible if any, employed by the business named above (if applicable) are a federal and state laws.	ar the credit is claim of \$50,000 per taxal dit is claimed. uivalent of 50% of the mount stated in secrets within twelve (12) tion provided above ce Shelter or Rape Cof Social Services with the secretion 135.815, RS to receive Missouri to	ble year. the value of the tion 135.550, months of doing true and accrisis Center will be reduced SMo.).	RSMo. onation dat ccurate. I he tax credit pr d if it is de	e. ave read and understand rogram. I also understand etermined that I have an certify that all individuals,
TAXPAYER SIGNATURE				
PRINTED NAME			DATE	
TYPE OF DONATION (ATTACH REQUIRED DOCUMENTATION)				
☐ Cash ☐ Check/Money Order ☐ Credit Card ☐ Stocks/	Bonds	Marketable S	Securities	☐ Real Estate
CONTRIBUTIONS THAT INCLUDE A BENEFIT				
FUNCTION OR EVENT Banquet Golf Tournament Benefit Auction Other	er (describe)			
BENEFIT DESCRIPTION				
FAIR MARKET VALUE OF THE BENEFIT				
I certify that on the date above, this agency received the contribution a required verification documentation is attached to this application.	ıs noted and agree ı	upon the valu	e of the cor	ntribution as specified. The
EXECUTIVE DIRECTOR SIGNATURE			DATE	

INSTRUCTIONS

- 1. Taxpayer or business name should be the complete name submitted on annual income tax returns. If filing Missouri joint income tax return, both spouses' names must be listed.
- 2. Provide the complete address and telephone number of the taxpayer(s) or business.
- 3. Taxpayer identification is either the social security number of the individual taxpayer(s) or the business federal identification number (FEIN). Social security number(s) must be provided for all taxpayers listed in item #1.
- 4. Amount of donation is the total funds received or the total value of the donation after the fair market value of any benefit received is deducted (the eligible tax credit will be 50% of this amount).
- 5. Amount of tax credit is equal to 50% of the donation.
- 6. Date of the donation.
- 7. Taxpayer type place an (X) in the appropriate box and provide supporting documentation indicated if applicable.

Supporting Documentation:

Partnerships, S Corporations and LLC's please provide a list of all shareholder names; social security numbers, and percentage of ownership.

Charitable organizations applying for tax credits under section 135.550, RSMo, must provide:

- proof the organization is exempt from federal income tax (copy of federal tax exemption certificate), and
- proof of business activities that are unrelated to its charitable activities of which Missouri unrelated business taxable income, if any, would be subject to the state income tax imposed under chapter 143, RSMo (i.e. most recent Missouri State Income Tax Return). If the unrelated business activities do not generate Missouri business taxable income, an Executive Officer of the organization must provide an attestation indicating the organization's unrelated business activities do not generate taxable business income but if there were taxable business income, that income would be subject to the state tax imposed under chapter 143, RSMo (attach the Charitable Organization Attestation Form to the application).
- 8. Identify the Domestic Violence Shelter or Rape Crisis Center receiving the donation.
- 9. Provide the organization's physical address in addition to a P.O. Box (if applicable).
- 10. Provide the organization's telephone.
- 11. Provide the organization's contact person's name.
- 12. Identify the type of donation made and provide supporting documentation.

Verifying documentation must be attached to the tax credit application. The type of documentation required will depend on the type of donation. Required documentation includes the following:

- Cash legible receipt from the Domestic Violence Shelter or Rape Crisis Center which indicates the name and address of the organization; name, address and telephone number of the contributor; amount of the cash donation and the date the contribution was received; signature of a representative of the Domestic Violence Shelter or Rape Crisis Center receiving the contribution.
- Check photocopy of the cancelled check, front and back if not possible then a copy of the original check and a
 receipt from the Domestic Violence Shelter or Rape Crisis Center including the same information required of a cash
 donation.
- Credit Card legible transaction receipt with the name and address of the domestic violence shelter or Rape Crisis Center; name, address, and telephone number of the contributor; amount and the date the contribution was received; signature of a representative of the Domestic Violence Shelter or Rape Crisis Center receiving the contribution. Receipts should have the credit card account number blacked out.
- Money order or cashiers check legible copy of the original document with the name and address of the Domestic Violence Shelter or Rape Crisis Center, name, address and telephone number of the contributor; amount of the cash donation and the date the contribution was received; signature of a representative of the Domestic Violence Shelter or Rape Crisis Center receiving the contribution.

INSTRUCTIONS (CONTINUED)

- Values of contributed stocks and bonds must be determined by a reputable source (e.g. Wall Street Journal, NYSE, NASDAQ, etc.). Information required when submitting applications for tax credit shall include the source and date the stock was valued and how the bond amount was determined.
- The values of contributions of real estate shall be equal to the lowest of at least two (2) qualified independent appraisals for commercial, vacant or residential property that has been determined to have a value of over \$25,000. Commercial, vacant or residential property having a value of \$25,000 or less will require only one (1) appraisal.
- Contributions that include a benefit to the donor documentation required will depend on how the type of
 contribution was made (i.e. cash, check, etc.). The same information is required as described for those types of
 donations listed above. Additional information required includes the type of function or event from which the benefit
 was received, description of the benefit received (if an auction item, identify the item received), gross amount of
 the contribution, fair market value of the benefit, and how the fair market value of the benefit was determined.

The Director will verify with the Director of Revenue any outstanding balances due from taxpayer's prior year's state tax liability. If a balance due is outstanding, the amount of tax credit issued under this rule will be reduced by that amount. The Director shall be subject to the confidentiality and penalty provisions of section 32.057, RSMo, relating to the disclosure of tax information.

Within forty-five (45) days of receipt of the tax credit application, the Director will provide notification of its decision to approve the application to the following parties:

- Taxpayer (notification to the taxpayer will include the amount of tax credit that was approved)
- · Missouri Department of Revenue.

Tax credits shall be issued in the order contributions are received.

"I certify that	(ORGANIZATION NAME)	engages in unre	elated busines		
activities of which do not generate Missouri unrelated business taxable income. If these activities did generate Missouri unrelated business taxable income, that income would be subject to the state income tax imposed under chapter 143, RSMo."					
IGNATURE					
RINTED NAME					
TLE		DATE			