



Missouri Department of Revenue  
**Special Events Sales Tax Report**

Department Use Only	
Name of Event	
Date(s) (MM/DD/YYYY)	
City Location or Code	
County Location or Code	

You must complete this form and submit it to the address below within ten days after the close of the event. This report is subject to all provisions set forth by the Missouri Department of Revenue Sales Tax Rules and Regulations.

If you have a valid Missouri Retail Sales License, do not submit this form. You must report these sales on your regular sales tax return. If you do not currently have a location for the city and county listed above, you may email [businessstaxregister@dor.mo.gov](mailto:businessstaxregister@dor.mo.gov) to request this location be added to your account.

<b>Business &amp; Taxpayer</b>	Taxpayer Name (Last Name, First, Middle Initial)		Taxpayer's Social Security Number (Required)			
	Business Name		Federal Employer Identification Number (Optional)			
	Taxpayer Street Address		City	State	Zip Code	
	Telephone Number (____) _____ - _____	E-mail Address				
	Event Date(s)			Due Date	10 days after the close of the event	

- Select this box if you only took orders and did not make on the spot sales. A new location will not be added to your account. Mail this report to the address below or e-mail it to [BusinessTaxRegister@dor.mo.gov](mailto:BusinessTaxRegister@dor.mo.gov).
- If you are 65 or older and claiming the handicraft exemption, select this box and attach a completed Exemption Certificate For Sales of Handicraft Items (**Form 2478**), which can be found on our website at <http://dor.mo.gov/forms/>. Mail forms 2478 and 2360 to the address below or e-mail them to [BusinessTaxRegister@dor.mo.gov](mailto:BusinessTaxRegister@dor.mo.gov).
- If you are a service or display only, select this box and mail this form to the address below or e-mail it to [BusinessTaxRegister@dor.mo.gov](mailto:BusinessTaxRegister@dor.mo.gov).
- If you are selling food that is subject to the reduced state food tax rate, select this box and mail this form to the address below or e-mail it to [BusinessTaxRegister@dor.mo.gov](mailto:BusinessTaxRegister@dor.mo.gov).

List the total amount of your sales in Column 2. Compute the tax due by multiplying Column 2 by the appropriate tax rate for this location. Enter amount of tax in Column 4. This report along with your remittance must be returned to the address below within 10 days after the event date to avoid late charges. If you make taxable sales and do not qualify for an exemption, you will be registered for a Missouri sales tax identification number.

Please send a check or money order only.

<b>Sales Made at Event</b>	Column 1 Event Name and Location	Column 2 Gross Receipts	Column 3 Tax Rate	Column 4 Tax Due
		\$	% \$	

<b>Signature</b>	Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.		
	Signature (of Taxpayer Listed Above)		Printed Name
	Title	Date (MM/DD/YYYY) ____ / ____ / _____	

If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid may be presented again electronically.

**Mail this form and remittance to:**

Missouri Department of Revenue  
P.O. Box 1325  
Jefferson City, MO 65105-1325

**Phone:** (573) 751-5860  
**Fax:** (573) 526-8747  
**E-mail:** [BusinessTaxRegister@dor.mo.gov](mailto:BusinessTaxRegister@dor.mo.gov)

Form 2360 (Revised 05-2015)

Visit <http://dor.mo.gov/faq/business/special.php> for additional information.

