



Missouri Agricultural and Small Business Development Authority
Qualified Beef Tax Credit Application

MISSOURI FORM
QB
 Chapter 135.679 RSMo

Please Type or Print			
SECTION 1		QUALIFIED BEEF PRODUCER INFORMATION	
QUALIFIED BEEF PRODUCER (QBP) #:		BUSINESS FEDERAL IDENTIFICATION NUMBER/SOCIAL SECURITY NUMBER	
NAME OF QUALIFIED BEEF PRODUCER		CONTACT NAME	
911 ADDRESS		MAILING ADDRESS (IF NOT THE SAME AS 911 ADDRESS)	
CITY		STATE	ZIP CODE
TELEPHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS	
INDIVIDUAL OR BUSINESS TAX YEAR: ___ CALENDAR YEAR ___ FISCAL YEAR (BEGINNING DATE _____ ENDING DATE _____)			
SECTION 2		ATTACHMENTS – Required attachments for tax credit eligibility	
SECTION 3		CERTIFICATION OF QUALIFIED BEEF PRODUCER	
<p>Pursuant to the “Guidelines and Procedures” document for the “Qualified Beef Tax Credit Program” issued by the Missouri Agricultural and Small Business Development Authority, the applicant (signing below) hereby certifies, subject to penalties of perjury, the following:</p> <ol style="list-style-type: none"> 1. I have received and read the Program Guidelines and Procedures. 2. I am not (i) a commissioner or employee of the Missouri Agricultural and Small Business Development Authority, (ii) a member of the Missouri General Assembly, (iii) a state-wide elected official, (iv) a director of a state department, or (v) a spouse or dependent child of any of the above [either of] who has a substantial interest in the Qualified Beef Producers entity shown in Section 1. Substantial interest is defined as ownership by the individual, the individual’s spouse, or the individual’s dependent children, whether singularly or collectively, of ten percent or more of the beef production operation. 3. I, the undersigned, to the best of my knowledge, information and belief declare that the information submitted is true, correct, and complete, and I hereby agree to comply with the requirements of the program as specified above. 4. I certify that all the qualified beef animals shown on the scale and sales tickets were born, raised, backgrounded or finished in the state of Missouri. (Age and Source Certification) 5. I certify that all the qualified beef animals shown on the scale and sales tickets are less than thirty (30) months of age. 6. By participating in this tax credit program, did you create any new jobs? ___ NO ___ YES, if yes # of full-time permanent ___ # of part-time permanent ___ # of Construction jobs ___ 			
SIGNATURE OF PRODUCER MEMBER		TITLE	DATE
SECTION 4		Checklist before you mail your application in:	
___ \$50.00 application fee enclosed ___ I have enclosed copies of all scale tickets and sale receipts for my Qualified Beef animals sold by sex for which tax credits are requested. ___ Completed and Notarized MASBDA Age and Source Certification form ___ Certification of Citizenship/Immigration Status form, Proof of Lawful Presence, and Affidavit of Authorized Workers (if you employ others)			
RETURN COMPLETED FORM AND \$50 APPLICATION PROCESSING FEE MADE PAYABLE TO “MASBDA”: MISSOURI AGRICULTURAL AND SMALL BUSINESS DEVELOPMENT AUTHORITY (MASBDA) P.O. BOX 630, 1616 MISSOURI BLVD JEFFERSON CITY, MO 65102-0630 TELEPHONE: (573) 751-2129		DATE RECEIVED IN OFFICE	

Certification of Citizenship/ Immigration Status

By affixing my (our) signature below, I (we) hereby certify, subject to penalty of perjury, I am the applicant or an authorized representative of the applicant and as such am authorized to make the following affirmation:

I am a United States Citizen or have been granted lawful permanent residence* of the United States. I understand that I am required by state law to provide proof of my citizenship, residency, and identity in order to apply for any state programs.

_____ Signature	_____ Title	_____ Date
_____ Signature	_____ Title	_____ Date

*Pursuant to 208.009.3 RSMo, all applicants are required to provide proof of citizenship, identity, and residency at the time of applying for any state administered benefits. You must provide a copy of your valid Missouri driver's license with this application. If you do not have or cannot provide this, please see "Additional Documentation" on page 2 for allowed alternatives.

Employer Status

By affixing my (our) signature below, I (we) hereby certify, subject to penalties of perjury, I am the applicant or an authorized representative of the applicant and as such am authorized to make the following affirmation:

(Please select the statement that applies)

_____ I DO NOT employ others in an employer- employee relationship.

_____ I employ others in an employer- employee relationship. (***If this statement is chosen you must also complete the Affidavit of Authorized Workers.***)

_____ Signature	_____ Title	_____ Date
_____ Signature	_____ Title	_____ Date

Additional Documentation

If a valid Missouri driver's license is not available for this verification, other items that can be provided are listed below. Please provide one or more of the following from each of the categories below.

Proof of Lawful Presence for U.S. Citizens*

One of the following:

- U.S. Birth Certificate (certified with embossed or raised seal issued by state or local government)
- U.S. Passport (valid)
- Certificate of Citizenship
- Certificate of Naturalization
- Certificate of Birth Abroad

Proof of Identity

Provide Social Security Number, if one has been assigned; or If a Social Security Number has not been assigned, the applicant must present a letter from the Social Security Administration (SSA) regarding the status of the applicant's Social Security Number.

Proof of Name Change:

One of the following:

If the name on the document you present for proof of lawful presence does not match your current name, present **one** of the documents below showing your current name.

- U.S. Passport (valid)
- Social Security Card/Medicare Card
- Certified Marriage License
- Certified Divorce Decree
- Certified Court Order
- Certified Adoption Papers or Amended Birth Certificate

Proof of Residency (A Post Office Box will not be allowed as a resident address.)

One of the following:

- Utility bill, most recent (phone, water, gas, electric, trash or sewer, etc.)
- Voter registration card, most recent
- Bank statement, most recent
- Government check, most recent
- Pay check, most recent
- Property tax receipt, most recent
- Housing rental contract of current residence
- Mortgage documents of current residence
- An official letter or document from another state or local government agency, not previously listed, which is on the agency's letterhead or contains the official seal of the issuing agency issued within the previous 30 days
- Letter or other documentation issued by the postmaster within the previous 30 days establishing residency
- Other government document that contains the name and address of the applicant issued within the previous 30 days

*For any other immigrant status, please call MASBDA for more information.

Affidavit of Authorized Workers

BEFORE ME, the undersigned Notary, _____, on this _____ day of _____, 20____, personally appeared _____, known to me to be a credible person and of lawful age, who being by me first duly sworn, on _____ oath, deposes and says:

I certify that I am either the applicant or am an authorized representative of the applicant and as such am authorized to make the statement of affirmation contained herein.

I (We) hereby certify, subject to penalties of law, that I(we) do not knowingly employ, hire for employment, or continue to employ any unauthorized alien to perform work in the state of Missouri and further certify I have and will continue to comply with federal law (8 U.S.C., 1324a) which requires the examination of an appropriate document or documents to verify that each individual is not an unauthorized alien.

I further certify that I (the applicant) am enrolled in a federal work authorization program and actively verify the work authorization status of all those hired and currently employed by me, my business, and/or any other business entity which I have hiring or management authority.

I understand that as a condition to participate in this program administered by a political subdivision of the State of Missouri I (the applicant) must provide documentation to certify my enrollment and participation in the federal work authorization program. This documentation includes the Memorandum of Understanding (MOU) established with the USCIS Verification Division when enrolling in E-verify.

I certify that I (the applicant) shall include in any contract it enters with a subcontractor in connection with the activities that qualify the applicant for this program, an affirmative statement from the subcontractor that such subcontractor is not knowingly in violation of Section 285.530.1 RSMo, and shall not be in violation during the length of the contract. In addition the applicant will receive a sworn affidavit from the subcontractor under the penalty of perjury, attesting that the subcontractor's employees are lawfully present in the United States. I certify that the applicant will maintain and provide MASBDA access to documentation demonstrating compliance with this requirement.

I understand that if the applicant is found to have employed an unauthorized alien, the applicant may be subject to penalties pursuant to law, including Sections 135.815, 285.025, and 285.535, RSMo.

_____ Signature	_____ Title	_____ Date
_____ Signature	_____ Title	_____ Date

State of Missouri
County of _____

Subscribed and sworn to before me, this _____ day of _____, 20____.

[Notary Seal:]

[signature of Notary]

My commission expires: _____, 20____.

[typed name of Notary]
NOTARY PUBLIC

MASBDA

AGE AND SOURCE CERTIFICATION

I _____, certify, subject to audit and penalty of perjury, that all qualified beef animals included in the request for Qualified Beef Tax Credits;

- were born in Missouri,
- are 30 months or less of age, and
- were raised in Missouri.

If any of the qualified beef animals included in the request for Qualified Beef Tax Credits are finished animals then I further certify, subject to audit and penalty of perjury, that those animals:

- were born in Missouri,
- are 30 months or less of age,
- were raised in Missouri, and
- were finished in Missouri.

(signature)

(date)

(print name)

(title)

Notary

State of: _____

County of: _____

Subscribed and sworn to before me this _____ day of _____ in the year _____.

(SEAL)

Signature of Notary Public

My commission expires: _____

Submit to: Missouri Agricultural and Small Business Development Authority
P.O. Box 630
Jefferson City, MO 65102