



MISSOURI DEPARTMENT OF SOCIAL SERVICES
 PREGNANCY RESOURCE CENTER TAX CREDIT
APPLICATION FOR AGENCY ELIGIBILITY VERIFICATION

LEGAL NAME OF THE ORGANIZATION	
MAILING ADDRESS	
PHYSICAL ADDRESS	
TELEPHONE NUMBER	CHARTER NUMBER (ISSUED BY THE SECRETARY OF STATE)
EXECUTIVE DIRECTOR	CONTACT PERSON

Information required to be considered as a classified Pregnancy Resource Center eligible to receive contributions that may qualify for the Pregnancy Resource Center Tax Credit.

1. A copy of the organization's certificate of incorporation;
2. Verification of Internal Revenue Services (IRS) tax exemption status (tax exemption certificate);
3. Brief description of the agency's primary business functions, number of clients served annually (January-December) and facility capacity.

_____ is a nonresidential facility located in the state of Missouri that provides assistance to women with unplanned or crisis pregnancies, or similar services to encourage and assist women in carrying their pregnancies to term. The organization does not perform childbirths, nor perform, induce or refer clients for abortion. Direct client services are provided at the facility at no cost to the client. Medical services, if provided, are in accordance to Missouri statute. Contributions may be declined at the organization's discretion.

In accordance with section 135.630, RSMo, I certify that the information provided above is true and accurate.

I agree to notify the Department of Social Services within thirty (30) days of any change in business functions that may affect my agency's qualifying status in this tax credit program.

EXECUTIVE DIRECTOR SIGNATURE	PRINTED NAME	DATE
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Remit to: Department of Social Services
 Attention: Pregnancy Resource Center Tax Credit
 P.O. Box 863
 Jefferson City, MO 65102-0863

The Director shall inform each eligible pregnancy resource center of its qualification status no later than thirty (30) days following July 1 of each fiscal year.

Once an agency has been certified by the Department of Social Services, the organization's name will be added to the list of agencies that are eligible for the Pregnancy Resource Center Tax Credit. A complete list of eligible agencies is available on the Department of Social Services website: www.dss.mo.gov or by writing to the address listed above.

Agencies must submit application for recertification annually.

All incomplete or inaccurate applications will be returned to the Pregnancy Resource Center.



APPLICATION FOR AGENCY ELIGIBILITY VERIFICATION

INSTRUCTIONS

1. Provide the organization's LEGAL name.
2. Provide the organization's physical address in addition to a P.O. Box (if applicable).
3. Provide the organization's telephone number.
4. The agency's Charter Number issued by the Secretary of State.
5. Provide the name of the agency's executive director and a contact person (if different from the executive director.)

Supporting Documentation to be attached:

1. A copy of certificate of incorporation.
2. Verification of Internal Revenue Service (IRS) tax exempt status.
3. A brief program description including the number of clients served annually (January-December) and the capacity of the facility.

All information should be submitted to:

Department of Social Services
Attention: Pregnancy Resource Center Tax Credit
P.O. Box 863
Jefferson City, MO 65102-0863

All pregnancy resource centers must establish their eligibility on an annual basis. All centers must submit the above information no later than June 1 of each calendar year to maintain their eligibility for the tax credit.