



Missouri Department of Revenue
**Statement of Income Tax Payments
 for Nonresident Entertainers**



17349010001

3. Tax Year
<input type="checkbox"/> 1st Q (Jan - Mar)
<input type="checkbox"/> 2nd Q (Apr - Jun)
<input type="checkbox"/> 3rd Q (Jul - Sept)
<input type="checkbox"/> 4th Q (Oct - Dec)

Entertainer

1. Name of Entertainer			4. Entertainer's Missouri Tax I.D. Number		
2. Address			5. Entertainer's Federal Employer I.D. Number or Social Security Number		
City	State	ZIP Code	Office Use Only		
6. Income Subject to Tax			7. Missouri Income Tax Payment		
00			00		
8. Entertainer's Type of Entity		9. Venue Name		10. Promoter Name	
<input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship		11. Date(s) of Performance (MM/DD/YYYY)			

Form MO-2ENT (Revised 03-2017)



Missouri Department of Revenue
**Statement of Income Tax Payments
 for Nonresident Entertainers**



17349010001

3. Tax Year
<input type="checkbox"/> 1st Q (Jan - Mar)
<input type="checkbox"/> 2nd Q (Apr - Jun)
<input type="checkbox"/> 3rd Q (Jul - Sept)
<input type="checkbox"/> 4th Q (Oct - Dec)

Entertainer

1. Name of Entertainer			4. Entertainer's Missouri Tax I.D. Number		
2. Address			5. Entertainer's Federal Employer I.D. Number or Social Security Number		
City	State	ZIP Code	Office Use Only		
6. Income Subject to Tax			7. Missouri Income Tax Payment		
00			00		
8. Entertainer's Type of Entity		9. Venue Name		10. Promoter Name	
<input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship		11. Date(s) of Performance (MM/DD/YYYY)			

Form MO-2ENT (Revised 03-2017)



Missouri Department of Revenue
**Statement of Income Tax Payments
 for Nonresident Entertainers**



17349010001

3. Tax Year
<input type="checkbox"/> 1st Q (Jan - Mar)
<input type="checkbox"/> 2nd Q (Apr - Jun)
<input type="checkbox"/> 3rd Q (Jul - Sept)
<input type="checkbox"/> 4th Q (Oct - Dec)

Entertainer

1. Name of Entertainer			4. Entertainer's Missouri Tax I.D. Number		
2. Address			5. Entertainer's Federal Employer I.D. Number or Social Security Number		
City	State	ZIP Code	Office Use Only		
6. Income Subject to Tax			7. Missouri Income Tax Payment		
00			00		
8. Entertainer's Type of Entity		9. Venue Name		10. Promoter Name	
<input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship		11. Date(s) of Performance (MM/DD/YYYY)			

Form MO-2ENT (Revised 03-2017)