



STATE OF MAINE
 MAINE REVENUE SERVICES
 24 STATE HOUSE STATION
 AUGUSTA, MAINE
 04333-0024

ADMINISTRATIVE & FINANCIAL
 SERVICE

REBECCA M. WYKE
 COMMISSIONER

John Elias Baldacci
 GOVERNOR

JEROME D. GERARD
 ACTING EXECUTIVE DIRECTOR

**APPLICATION FOR SALE/USE TAX EXEMPTION CERTIFICATE FOR AN
 INCORPORATED NONPROFIT ORGANIZATION PROVIDING CERTAIN
 SERVICES FOR HEARING-IMPAIRED PERSONS**

Name of Corporation _____
Name of Organization _____
Physical Location _____
Mailing Address _____

The statute reads, "Organizations providing certain services for hearing-impaired persons. Sales to incorporated nonprofit organizations whose primary purposes are to promote public understanding of hearing impairment and to assist hearing-impaired persons through the dissemination of information about hearing impairment to the general public and referral to and coordination of community resources available to hearing impaired persons. PL 1989, c. 533, §8 (new); c, 871, §14 (amd).

Is the organization incorporated? Yes ___ No ___
Send a copy of the articles of incorporation
Has the organization received 501(c) nonprofit status from the IRS? Yes ___ No ___
Send a copy of the IRS determination letter indicating 501(c) nonprofit status

IN ORDER TO PROCESS THE APPLICATION THE FOLLOWING MUST BE INCLUDED

1. Copy of the Articles of Incorporation, as well as a copy of the Constitution and/or By-law
2. Copy of the IRS determination letter indicating 501(c) nonprofit status
3. Please forward any publications issued by your organization which would provide details regarding purpose, mission and/or services offered, if applicable.

I hereby certify that _____ is an incorporated nonprofit organization providing services for hearing-impaired persons. I therefore request that a sales/use tax exemption certificate be issued to the above organization pursuant to Title 36 MRSA 1760 (70).

Date: _____ Signature: _____
 Tel: _____ Print Name: _____
 Fed ID: _____ Title: _____
 Date Facility Opened: _____

ST-R-30