



# MAINE REVENUE SERVICES SALES, FUEL & SPECIAL TAX DIVISION APPLICATION FORM

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FOR SALE/USE TAX EXEMPTION CERTIFICATE FOR AN  
INCORPORATED NONPROFIT ORGANIZATION ENGAGED PRIMARILY  
IN PROVIDING SUPPORT FOR SINGLE-PARENT FAMILIES

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Name of Corporation \_\_\_\_\_  
Name of Organization \_\_\_\_\_  
*Physical Location* \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
\_\_\_\_\_

**The statute reads,** "Incorporated nonprofit providers of certain support systems for single-parent families. Sales to incorporated nonprofit organizations engaged primarily in providing support systems for single-parent families for the development of psychological and economic self-sufficiency."

**Is the organization incorporated?** Yes \_\_\_ No \_\_\_  
**Has the organization received 501(c) nonprofit status from the IRS?** Yes \_\_\_ No \_\_\_

IF YOU ANSWERED "**NO**" TO ANY OF THE ABOVE QUESTIONS, **STOP** HERE YOU DO NOT QUALIFY.

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-laws, including the "Dissolution Clause."
2. Copy of the IRS determination letter indicating 501(c) nonprofit status.

Note: All information contained on this application is subject to VERIFICATION by Maine Revenue Services. Maine Revenue Services may request additional information or documentation necessary to determine eligibility.

I hereby certify under the pains and penalties of perjury that \_\_\_\_\_ is an incorporated nonprofit organization providing support systems for single-parent families. I therefore request that a sales/use tax exemption certificate be issued to the above organization pursuant to Title 36 MRSA 1760 (66).

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_  
Tel: \_\_\_\_\_ Printed Name: \_\_\_\_\_  
Fed ID: \_\_\_\_\_ Title: \_\_\_\_\_  
Date Facility Opened: \_\_\_\_\_

ST-R-12 (REV 10/05)

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