



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

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## CERTAIN VETERANS' SERVICE ORGANIZATIONS

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

**The statute reads,** "Certain veterans' service organizations. Sales to an organization that provides services to veterans and their families that is chartered under 36 United States Code, Subtitle II, Part B, including posts or local offices of that organization, and that is recognized as a veterans' service organization by the United States Department of Veterans Affairs." PL 2015, c. 465, Pt. C, §1 (NEW); PL 2015, c. 465, Pt. C, §2 (AFF).

*Has the organization received 501(c) nonprofit status from the IRS? Yes \_\_\_ No \_\_\_*  
*Does the organization provide services to veterans and their families? Yes \_\_\_ No \_\_\_*  
*Is the organization chartered under 36 United States Code, Subtitle II, Part B? Yes \_\_\_ No \_\_\_*  
*Is the organization recognized as a veterans' service organization by the United States Department of Veterans Affairs? Yes \_\_\_ No \_\_\_*

### 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;
2. Copy of the IRS determination letter indicating 501(c) nonprofit status;
3. Please forward any licenses, publications issued to or by your organization which would provide details regarding purpose, mission and/or services offered, if applicable.

**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 organization that provides services to veterans and their families that is chartered under 36 United States Code, Subtitle II, Part B, and that is recognized as a veterans' service organization by the United States Department of Veterans Affairs. I therefore request that a sales/use tax exemption certificate be issued to the above organization pursuant to 36 M.R.S. § 1760(100).

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

Mailing address: Maine Revenue Services, P.O. Box 1060, Augusta, ME 04332-1060  
APP-157 (Rev 03/2020)