



Sales Tax Exempt Status Application

Full name of organization: _____

Contact person: _____ Social Security Number _____

Title: _____ Email Address: _____

Website Address: _____ South Dakota Physical Location: _____

Mailing Address: Street or Box Number: _____

City: _____ State: _____ Zip Code: _____ County _____

Federal ID Number: _____

Address of business, if different than above: Street: _____

City: _____ State: _____ Zip Code: _____ County: _____

Business telephone: _____ Contact's home telephone: _____

Type of organization: (check one)
 Governmental Agency/Public or Municipal Corporation
 Public School District
 Relief Agency
 Religious Educational Institution
 Private Educational Institution

Will there be more than one location of operation?
 Yes
 No
If yes, how many? _____

Date the organization was formed: _____

Date activities began in South Dakota: _____

Does the organization currently have or ever had a tax license in South Dakota?
 Yes
 No

If yes, license number(s): _____

Please Email, Fax, or Mail Organizational Documents: (These documents will be kept on file with the Department of Revenue)

- 1. Bylaws
2. Articles of Incorporation
3. Constitution, Articles of Association
4. If applying for relief agency exemption:
- Internal Revenue Section 501 (C) (3) exemption (Include a copy of IRS Form 1023, App. for Exemption)
- Budget or Financial Statement
5. If applying for either private or religious educational institution exemption:
- Internal Revenue Section 501 (C) (3) exemption or 501 (D) (Include a copy of the IRS Application for Exemption)
- Certification or Accreditation Approvals
6. If the organization does not have any of these documents, attach an explanation.

Activities and Operational Information (Send additional pages if there is not enough room)

RELIEF AGENCIES ONLY:

1. Sources of Funding (Please Send Budget or Financial Statement):

2. Nature of Expenditures:

3. Explain specifically what goods and/or services your organization provides exclusively for the relief of the poor, disadvantaged, or underprivileged:

RELIGIOUS OR PRIVATE EDUCATIONAL INSTITUTES ONLY:

1. Describe the South Dakota physical location of the institution, including the classrooms:

2. Describe the faculty, students, courses of study, accreditation, and degree awarded:

3) Explain what agency your school is accredited by and send a copy of the accreditation:

4. Explain how the school is related to a religious society and how the religious views are promoted through education (Religious Educational Institution Only):

I DECLARE under the penalties of perjury that I am authorized to submit this application on behalf of the above-named organization and I have examined this application, including the accompanying statements, and to the best of my knowledge it is true, correct, and complete.