

Nonprofit Name:

## City and Borough of Sitka

PROVIDING FOR TODAY...PREPARING FOR TOMORROW

A Coast Guard City

Send completed application to:

City and Borough of Sitka

Finance Department - Sales Tax 100 Lincoln Street Sitka, Alaska 99835

Via email: tax@cityofsitka.org

## NONPROFIT SALES TAX EXEMPTION APPLICATION (NO FEE)

oate:		Federal ID #:	
	Officer:	Phone #:	
	Officer:	Phone #:	
	Officer:	Phone #:	
VERNMENT FUN	IDING:		
Local:			
State:	\$		
rederai:	\$		
Total:	\$		
THER INCOME:	\$		
RAND TOTAL:	\$		
Please attach sup		ch as prior year IRS Form 990 tax return an udit report.	d/or
			d/or
ignature		udit report.	d/or
ignature rinted Name		Phone Number	d/or
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ignature rinted Name itle	annual a	Phone Number	d/or
ignature rinted Name itle r office use only:	annual a	Phone Number  E-mail	d/or
rinted Name Title or office use only:	annual a	Phone Number  E-mail	d/or