New York State
Department of
Taxation
and Finance

New York State and Local Sales and Use Tax

Application for an Exempt Organization Certificate

ST-119.2
(7/97)

Name of organization		
Address (number and street)	City (town), state, and ZIP code	
Name and telephone number of person to be contacted (if the person is someone other than an officer, this application must be accompanied by a power of attorney executed by the officer)	( )	
Date organized	Date incorporated	Federal identification number

Check box 1a or 1b to indicate the section of law for which you are claiming exempt status.

1a ☐ **Section 1116(a)(4) –** Check the appropriate box to indicate the purpose for which you are claiming exempt status.

☐ Religious ☐ Testing for public safety ☐ Prevention of cruelty to children or animals
☐ Charitable ☐ Scientific ☐ Fostering national or international amateur sports competition
☐ Educational ☐ Literary

1b ☐ **Section 1116(a)(5)** Posts, organizations, and auxiliary of past or present members of the armed services.

What percentage of your members are past or present members of the armed services of the United States? _____ %
What percentage of your members are cadets or are spouses, widows, or widowers of cadets or past or present members of the armed services? _____ %
What percentage of your members do not fall within either of the above categories? _____ %

2 Are you currently registered as a vendor with the Tax Department? ☐ Yes ☐ No If *Yes*, enter your *Certificate of Authority* number _____ .

If you answer *Yes* to questions 3 through 7, attach an explanation.

3 Has any distribution of the organization's property ever been made to shareholders or members? ☐ Yes ☐ No
4 Does any part of the net earnings of the organization go to the benefit of any private shareholder or individual? ☐ Yes ☐ No
5 Has the organization ever advocated or opposed pending or proposed legislation? ☐ Yes ☐ No
6 Has the organization ever participated in a political campaign or endorsed a candidate for public office? ☐ Yes ☐ No
7 If the organization fosters national or international amateur sports competition, does it provide any facilities or equipment, either directly or indirectly, for the use of amateur athletes? ☐ Yes ☐ No

8 Have you received an exemption from federal income tax? (If *Yes*, see instructions) ☐ Yes ☐ No
9 If you are a branch or chapter, has your parent organization received an exemption from federal income tax that applies to subordinate branches or chapters? (If *Yes*, see instructions) ☐ Yes ☐ No

10 Check the appropriate box to indicate your type of organization.

☐ Corporation – *(attach a copy of articles of incorporation, including filing receipt, and bylaws)*
☐ Trust – *(attach a copy of Declaration of Trust and bylaws)*
☐ Other – *(attach a copy of constitution and bylaws)*

11 Attach the following to this application:

— **Statement of activities** fully describing all current and proposed activities.
— **Statement of receipts and expenditures** for your most recent fiscal year of operation, clearly reflecting the nature and amount of receipts and the purpose and amount of expenditures. (If you have been in existence less than a year, submit a statement of your receipts and expenditures to date, and a proposed budget for the rest of the year.)
— **Statement of assets and liabilities** as of the end of your most recent fiscal year (if you have been in existence less than a year, your statement should be as of the date of this application).

I declare that I have examined the information given in this application and all attachments and, to the best of my knowledge and belief, it is correct and complete. I understand that a willfully false representation is a crime punishable under the laws of New York State including but not limited to sections 175.30, 175.35, and 210.45 of the Penal Law, and section 1817(b) of the Tax Law.

Signature of officer or trustee	Date
Name of title of officer or trustee (please print)	