

**LOUISIANA**  
 DEPARTMENT of REVENUE

**Purchases by Nonprofit Organizations that  
 Train or Employ Persons with Disabilities**

Application/Exemption Certificate

*Louisiana R.S. 47:301(8)(f)***Mail to:**
 Louisiana Department of Revenue  
 Revenue Processing Center  
 P. O. Box 4998  
 Baton Rouge, LA 70821-4998  
 Phone: (855) 307-3893
**PLEASE PRINT OR TYPE**

Nonprofit Organization Name		Telephone Number
Physical Address		
City	State	ZIP
Mailing Address		
City	State	ZIP

The above nonprofit organization hereby applies for the state sales tax exclusion for purchases by the organization allowed by Revised Statute 47:301(8)(f). In applying for the sales tax exclusion, the organization certifies the following:

1. The organization is a bona fide nonprofit organization;
2. The nonprofit organization sells donated goods; and
3. Seventy-five percent or more of the organization's revenues are spent on directly employing or training for employment persons with disabilities or workplace disadvantages.

Qualifying purchases are subject to state sales tax at rates as shown in the box below.

Applicable State Sales Tax Rates		
From	To	Rate
4/1/2016	6/30/2016	4%
7/1/2016	3/31/2019	0%

**Notice to Dealer: Report this sale under exemption code 1028.**

**Under penalty of perjury, I declare that I have examined this application for exemption and accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete.**

**Officer of the organization completing the application.**

Print/Type Name	Title
Signature	Date (mm/dd/yyyy)

**For Official Use**

<input type="checkbox"/> <b>Approved</b> <input type="checkbox"/> <b>Disapproved</b>	Exclusion Certificate Expires annually on _____, 20 _____.
Signature of Department Representative	Date (mm/dd/yyyy)

Questions about the completion of this application should be sent to [sales.inquiries@la.gov](mailto:sales.inquiries@la.gov).