

New Hampshire Department of

Revenue Administration

ED-01

SCHOLARSHIP ORGANIZATION APPLICATION

PRINT OR TYPE

This application is due no later than June 15.

STEP 1

	Organization Name					Federal Taxpayer Identification Number									
1.		5.													
	Number & Street Address														
2.															
	Address (continued)														
	City/Town State Zip Code + 4 (or Canadian Postal Code)														
3.															
	Organization Contact Name and Title Contact Phone														
4.															
	Contact Email														
ST	EP 2														
	I attest that the applying organization meets the following eligibility requirements of RSA 77-G:1, XVII:														
	a. The organization is a charitable organization incorporated or qualified to do business in New Hamp	shire	2;												

- b. The organization is exempt from federal income taxation pursuant to section 501(c)(3) of the Internal Revenue Code (Attach a copy of the organization's Section 501(c)(3) Exemption Determination Letter from the IRS);
- c. The organization complies with applicable state and federal anti-discrimination and privacy laws;
- d. The organization is registered with the New Hampshire Director of Charitable Trusts (Attach a copy of the Certificate of Registration); and
- e. The organization will comply with all of the provisions of RSA 77-G.

STEP 3

Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete. Further, I attest to the eligibility requirements listed in Step 2 above.

Authorized Signature (in ink)	Date (MMDDYYYY)
Print Signatory Name & Title	

MAIL TO: NH DRA

EDUCATION TAX CREDIT

PO BOX 637

CONCORD NH 03302-0637