

STATE OF HAWAII — DEPARTMENT OF TAXATION  
**APPLICATION FOR  
EXEMPTION FROM GENERAL EXCISE TAXES  
(SHORT FORM)**

PLEASE READ THE SEPARATE INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION

1. **NAME OF ORGANIZATION:** (Type or print clearly the full name of your group or organization)

\_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Business Address: \_\_\_\_\_  
\_\_\_\_\_

E-mail: \_\_\_\_\_ Website (if any): \_\_\_\_\_

Contact person: \_\_\_\_\_ Daytime Telephone No.: ( \_\_\_\_\_ ) \_\_\_\_\_

2. **The above-named organization is applying for exemption from general excise taxes under the following general excise tax section:** (Check only one box. See instructions for more information.)

- Section 237-23(a)(3), Hawaii Revised Statutes
- Section 237-23(a)(5), Hawaii Revised Statutes
- Section 237-23(a)(4), Hawaii Revised Statutes
- Section 237-23(a)(6), Hawaii Revised Statutes

3. **Effective date requested** \_\_\_\_\_ . See instructions for required statement.

4. **Date Organization's Hawaii Activity Began if Different from Date of Inception:** \_\_\_\_\_

5. **The following items MUST be submitted with this completed application:** (See instructions for more information.)

- A. Copy of filed federal Form 1023 **with all attachments**  
(for organizations described in IRC section 501(c)(3))  
or  
Copy of filed federal Form 1024 **with all attachments**  
(for organizations described in IRC sections 501(c)(4),  
(6), or (8))

**Mail the completed application to:**  
State of Hawaii  
Department of Taxation  
Technical Section  
P. O. Box 259  
Honolulu, HI 96809-0259

- B. Copy of IRS determination letter granting federal tax exemption. If you requested an IRS determination but have not received it, check this box. . . . .   
Upon receipt of the IRS determination letter, a copy must be submitted to the Department of Taxation.

- C.  Twenty Dollars (\$20) Registration Fee enclosed, **OR** (check only one)
- The \$20 general excise license fee has been paid. Enter your general excise Hawaii Tax I.D. Number here: **W** \_\_\_\_\_ - \_\_\_\_\_.

**DECLARATION**

I hereby declare under penalties provided by section 231-36, HRS, that I have examined this application and accompanying attachments, and, to the best of my knowledge and belief, they are true, correct, and complete.

\_\_\_\_\_  
**Signature of Officer or Duly Authorized Agent** **Title** **Date**

**FOR OFFICIAL USE ONLY:**

Approved by: \_\_\_\_\_ Date Approved: \_\_\_\_\_  
Title: \_\_\_\_\_

