

STATEMENT THAT NO TAXABLE INCOME DERIVED

A non-profit organization is an organization that has been determined by the Internal Revenue Service to be exempt from Federal income taxation as a nonprofit or not-for-profit organization under the terms of the Internal Revenue Code.

TO: Superintendent, Cape Lookout National Seashore

FROM: _____
Name of Organization

Doing Business as: _____

Type of Organization: _____

Tax Identification Number: _____

Address: _____
Address, City, Zip

Phone Number: _____ **Fax Number:** _____

Nature of Organization: **Please Select your Organization's exempt status:**
 501 (c)(3)
 501 (c)(5)
 501 (c)(8)
 501 (c)(19)
 Other (please specify _____)

Type of Organization (check one)
 Religious Educational Scientific Philanthropic Labor
 Agricultural Veterans Fraternal Other:

By signing below, the above named organization certifies that no taxable income will be derived from activities engaged in Cape Lookout National Seashore under the Special Use Permit.

Signature of Officer	Authorized Agent *
Printed Name	Printed Name
Title	Title
Date	Date

*** Authorized Agents signing on behalf of the Organization must attach a copy of their authorization to sign on behalf of the organization.**