

# MINNESOTA • REVENUE

600 N Robert Street Mail Station 6330 St Paul, MN 55146-6330

## **Affidavit Stating Nonprofit Home School Status for the Purpose of Obtaining a Sales Tax Exemption Number**

That we, the undersigned, are residents of the State of Minnesota with a home mailing address of:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

That we are presently engaged in the home education of our children and that we are in compliance with necessary reporting requirements for providing educational instruction under Minnesota law.

That we are seeking Sales Tax Exempt Authorization from the Minnesota Department of Revenue for the purpose of purchasing items to be used in the performance of educational functions of our home school.

That we will use our sales tax exemption privilege only for purchases of items necessary for the education of our children and will isolate the purchase of these items from those that are purchased for personal, recreational or other use by the family.

That any income generated by our operations shall be invested in the school for the future activities of the school.

The above has been read and approved by the following individuals:

Signature of Parents: \_\_\_\_\_

Print Names: \_\_\_\_\_

Date: \_\_\_\_\_