

# CITY OF NOME, ALASKA

Office of the City Clerk  
P.O. Box 281  
102 Division Street  
Nome, Alaska 99762-281  
(907)443-6663 (907)443-5345 fax

## 2024 APPLICATION FOR MUNICIPAL SALES TAX EXEMPTION

### GENERAL INFORMATION:

- The applicant must file this application **no later than December 1** prior to the calendar year for which the exemption is sought.
- The City Clerk as local assessor may at any time require additional information and proof, in whatever form he or she considers necessary, or the legal right and the amount of the exemption claimed.
- The applicant shall have the burden of establishing eligibility for an exemption, and the exemption ordinance and statutes shall be strictly construed in favor of taxation.
- Copies of the State statute (29.45.030) and Nome Code of Ordinances (17.10 – 17.30) pertaining to exemptions are available at Nome City Hall upon request.

1. **Applicant:** Alaska Native Tribal Health Consortium, Phone: 907-729-3600

Mailing Address 4500 Diplomacy Drive City Anchorage State Alaska

Physical Address 4500 Diplomacy Drive City Anchorage State Alaska

IRS Tax Exempt ID # 92-0162721 (please include IRS determination letter)

HAVE YOU PREVIOUSLY APPLIED FOR TAX EXEMPTION?	X YES	NO
HAVE YOU BEEN DENIED FOR EXEMPTION IN THE PAST?	YES	X NO
HAVE YOU BEEN PARTIALLY EXEMPTED IN THE PAST?	YES	X NO

2. Grounds For Exemption Requested:

**NON-PROFIT RELIGIOUS**  **CHARITABLE**  **CEMETERY**   
**HOSPITAL**  **EDUCATIONAL**

3. Description of organization's primary activities and/or services:

ANTHC DEHE provides clean water and sanitation services to Alaska Natives in rural areas in an effort to decrease infectious disease. Our primary role is to study linkages and provide sustainable water and waste water systems with increased energy efficiency in community facilities and keeping individual homes healthy.

4. Description of anticipated purchases on which exemption will be claimed:

Purchases for supplies, gas, food and room and board from local merchants.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Description of anticipated community benefit arising from the tax exemption:

Increased energy efficiency in community facilities for long term use and explore ways to upkeep individual homes. After decades of public health studies available showing the close link between absence of clean water and the increase in respiratory or skin infections. Actively promoting the importance of operations and maintenance of these systems.  
\_\_\_\_\_  
\_\_\_\_\_

DATED this 18<sup>th</sup> day of June, Year 2024.

Under penalty of perjury, the undersigned declares that he and/or she has examined this Application, including accompanying documents and statements, and to the best of his/her knowledge and belief, it is true, correct, and complete.

Lulu Swan-ANTHC  
APPLICANT

[Signature]  
PREPARER

STATE OF ALASKA )  
  )ss  
SECOND JUDICIAL DISTRICT )

SUBSCRIBED AND SWORN to or affirmed before me at Anchorage  
On this 18 day of June, 2024

Edward D. Mockta

NOTARY PUBLIC IN AND FOR THE STATE OF ALASKA  
My Commission Expires 11/30/2024



City Clerk Use Only:	
Received _____	No. _____
Issued:	Denied:



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

March 23, 2000

Alaska Area Native Health Services  
4141 Ambassador Drive  
Anchorage, Alaska 99508-5928

Refer to: A-OAM

Paul Sherry, President/CEO  
Alaska Native Tribal Health Consortium  
4141 Ambassador Drive  
Anchorage, Alaska 99508

Dear Mr. Sherry:

RE: Authorization to Utilize Federal Supply Sources

This letter shall serve as authorization for the Alaska Native Tribal Health Consortium (ANTHC) to utilize all Federal sources of supply required in the performance of the Public Law 93-638 Compact between the Department of Health and Human Services and the ANTHC. The authority to utilize all Federal sources of supply is provided in the Alaska Tribal Health Compact and is authorized by Section 105(k) of the Indian Self Determination and Education Assistance Act, as amended, and further implemented by Part 51 of the Federal Acquisition Regulation. The FEDSTRIP activity address code and activity address shall remain as previously provided. The ANTHC shall be responsible for the prompt payment of all supplies and services obtained through this authorization. Should any Federal Supply Schedule Contractor refuse to honor an order placed by the ANTHC, the undersigned should be notified immediately.

This authority shall remain in effect as long as the Public Law 93-638 Compact between the Department of Health and Human Services is in effect.

Should you have any questions regarding this authorization, please call me at 729-2965.

Sincerely,

Burton J. Humphrey  
Contracting Officer

DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
WASHINGTON, D.C. 20224

Date: SEP 28 1999

Alaska Native Tribal Health  
Consortium  
4141 Ambassador Drive, 2nd Floor  
Anchorage, AK 99508-5928

Employer Identification Number:  
92-0102721  
Issuing Specialist:  
Mr. Jorge L. Cuadros ID 50-06075  
Toll Free Customer Service Number:  
877-829-5500  
Accounting Period Ending:  
September 30  
Foundation Status Classification:  
509(a)(1) & 170(b)(1)(A)(iii)  
Form 990 Required:  
Yes

Dear Applicant:

Based on the information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in the section(s) indicated above.

Please notify the Ohio Employee Plans/Exempt Organizations (EP/EO) Customer Service office if there is any change in your name, address, sources of support, purposes, or method of operation. If you amend your organizational document or bylaws, please send a copy of the amendment to the Ohio EP/EO Customer Service office. The mailing address for that office is: Internal Revenue Service, EP/EO Customer Service, P.O. Box 2508, Cincinnati, OH 45201.

You are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act.

If you are involved in an excess benefit transaction, that transaction might be subject to the excise taxes of section 4958 of the Code. In this letter we are not determining whether any of your present or proposed arrangements would be considered an excess benefit transaction resulting in tax under section 4958. Additionally, you are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of Code sections 2055, 2106, and 2522.

Donors (including private foundations) may rely on this ruling unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your 509(a) status as indicated above, donors (other than private foundations) may not rely on the classification indicated above if they were in part responsible for, or were aware of, the act that resulted in your loss of such status, or they acquired knowledge that the Internal Revenue Service had given notice that you would be removed from that classification. Private foundations may rely on the classification as long as you were not directly or indirectly controlled by them or by disqualified persons with respect

**Alaska Native Tribal Health Consortium**

to them. However, private foundations may not rely on the classification indicated above if they acquired knowledge that the Internal Revenue Service had given notice that you would be removed from that classification.

Contribution deductions are allowable to donors only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fund-raising events may not necessarily qualify as fully deductible contributions, depending on the circumstances. If your organization conducts fund-raising events such as benefit dinners, shows, membership drives, etc., where something of value is received in return for payments, you are required to provide a written disclosure statement informing the donor of the fair market value of the specific items or services being provided. To do this you should, in advance of the event, determine the fair market value of the benefit received and state it in your fund-raising materials such as solicitations, tickets, and receipts in such a way that the donor can determine how much is deductible and how much is not. Your disclosure statement should be made, at the latest, at the time payment is received. Subject to certain exceptions, your disclosure responsibility applies to any fund-raising circumstance where each complete payment, including the contribution portion, exceeds \$75. In addition, donors must have written substantiation from the charity for any charitable contribution of \$250 or more. For further details regarding these substantiation and disclosure requirements, see the enclosed copy of Publication 1771. For additional guidance in this area, see Publication 1391, Deductibility of Payments Made to Organizations Conducting Fund-Raising Events, which is available at many IRS offices or by calling 1-800-TAX-FORM (1-800-829-3676).

In the heading of this letter we have indicated whether you must file Form 990, Return of Organization Exempt from Income Tax. If "Yes" is indicated, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. If your gross receipts each year are not normally more than \$25,000, we ask that you establish that you are not required to file Form 990 by completing Part I of that Form for your first year. Thereafter, you will not be required to file a return until your gross receipts exceed the \$25,000 minimum. For guidance in determining if your gross receipts are "normally" not more than the \$25,000 limit, see the instructions for the Form 990. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. The maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for an organization with gross receipts exceeding \$1,000,000 shall not exceed \$60,000. This penalty may also be charged if a return is not complete, so please be sure your return is complete before you file it. Form 990 should be filed with the Ogden Service Center, Ogden, UT 84201-0027.


The law requires you to make your annual return available for public inspection without charge for three years after the due date of the return. You are also required to make available for public inspection a copy of your exemption application, any supporting documents, and this exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are made widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 for each day you do not make these documents available for public inspection (up to a maximum of \$10,000 in the case of an annual return).

**Alaska Native Tribal Health Consortium**

You are not required to file federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

Please use the employer identification number indicated in the heading of this letter on all returns you file and in all correspondence with the Internal Revenue Service. Because this letter could help resolve any questions about your exempt status, you should keep it in your permanent records. If you have any questions about this letter, or about filing requirements, excise, employment, or other federal taxes, please contact the Ohio EP/EO Customer Service office at 877-829-5500 (a toll free number) or correspond with that office using the address indicated above.

Sincerely yours,

  
Marvin Friedlander  
Chief, Exempt Organizations  
Technical Branch 1

Enclosure:  
Pub. 1771