



Vermont Secretary of State
ARTICLES OF INCORPORATION
 of a Vermont Nonprofit Corporation

Business ID: _____

a. RETURN ACKNOWLEDGEMENT TO REQUIRED - NAME AND MAILING ADDRESS.

NAME _____

ADDRESS _____

Processed by: _____
 FOR OFFICE USE ONLY

THIS DOCUMENT MUST BE TYPEWRITTEN OR PRINTED (11A V.S.A. § 1.20)
 PLEASE REVIEW INSTRUCTIONS PAGE BEFORE BEGINNING

ARTICLE 1. BUSINESS NAME REQUIRED - NAME MUST INCLUDE IDENTIFIER SUCH AS "CORP," "INC," "CO," OR "LTD."- SEE INSTRUCTIONS PAGE FOR COMPLETE LIST OF OPTIONS.

CORPORATE NAME: _____

ARTICLE 2. BUSINESS INFORMATION REQUIRED.

a. BUSINESS DESCRIPTION

- This is a **charitable organization, church or religious organization or private foundation** as defined by **I.R.C. § 501(c)(3)**, organized for a charitable, religious, educational, scientific, literary, testing for public safety, foster of national or international amateur sports competition or prevention cruelty to children or animals purpose and will not be participating in political activity as defined in I.R.C. §§ 501(c)(4) or 527.
- This is a **church or religious organization**, as defined by I.R.C. § 501(c)(3), that is automatically tax exempt under **I.R.C. § 508(c)(1)** without filing with the IRS for Tax Exemption, and automatically qualified to receive federally tax deductible donations without filing without filing with the IRS for Tax Exempt Status under **IRS Publication 526** in accordance with *Walz v. Tax Comm'n of the City of New York*, 397 U.S. 664 (1970).
- This is a **social welfare organization, local association of employees or action organization**, as defined by **I.R.C. § 501(c)(4)**, organized for one or more of the purposes that would otherwise qualify for exemption under I.R.C. § 501(c)(3), except that it *may* participate in political activity by seeking legislation germane to the organization's programs for the purpose of promoting social welfare.
- This is a **fraternal beneficiary society, order or association**, as defined by **I.R.C. § 501(c)(8)**, organized for a fraternal purpose and provides for the payment of life, sick, accident or other benefits to the members of such society, order, or association or their dependents.
- This is a **domestic fraternal society or association**, as defined by **I.R.C. § 501(c)(10)**, organized for a fraternal purpose which does not provide for the payment of life, sick, accident or other benefits to the members of such society, order, or association or their dependents.
- This is a **political organization**, as defined by **I.R.C. § 527**, organized for the purpose of influencing or attempting to influence the selection, nomination, election, or appointment of any individual to any Federal, State, or local public office or office in a political organization, or the election of Presidential or Vice-Presidential electors, whether or not such individual or electors are selected, nominated, elected, or appointed.
- Other: NAICS CODE (PREFERRED) OR STATEMENT OF PRIMARY GOODS, SERVICES OR FUNCTION TO BE PROVIDED UNDER THIS BUSINESS NAME**

b. BUSINESS E-MAIL ADDRESS OPTIONAL _____

ARTICLE 3. NONPROFIT TYPE

a. MEMBER ORGANIZATION STATUS: REQUIRED - SELECT ONE (1) OF THE FOLLOWING.

- This corporation **IS** a member organization.
- This corporation **IS NOT** a member organization.

b. BENEFIT TYPE: REQUIRED - SELECT ONE (1) OF THE FOLLOWING.

- This corporation is a **PUBLIC** benefit corporation as defined by **11B V.S.A. § 17.05**.
- This corporation is a **MUTUAL** benefit corporation as defined by **11B V.S.A. § 17.05**.

This page intentionally left blank.
(Reverse of Page 1 of 2)



Vermont Secretary of State
ARTICLES OF INCORPORATION
 of a Vermont Nonprofit Corporation

ARTICLE 4. INITIAL PRINCIPAL BUSINESS OFFICE *REQUIRED.*

- a. **STREET ADDRESS: NO PO BOX** _____
 City/Town: _____ State/Province: _____
 Country: _____ ZIP/Postal Code: _____
- b. **MAILING ADDRESS:** _____
 City/Town: _____ State/Province: _____
 Country: _____ ZIP/Postal Code: _____

ARTICLE 5 INCORPORATOR: REQUIRED – MAY ALSO BE A DIRECTOR LISTED BELOW

NAME: _____
Address: _____
 City/Town: _____ State/Province: _____
 Country: _____ ZIP/Postal Code: _____

ARTICLE 6 INITIAL REGISTERED AGENT: REQUIRED – THIS CORPORATION'S DEDSIGNATED POINT OF CONTACT IN THE STATE OF VERMONT

- a. **NAME:** _____
- b. **STREET ADDRESS: AGENT'S REGULAR LOCATION DURING NORMAL BUSINESS HOURS.**
 Street Address: *NO PO BOX* _____
 City/Town: _____ State: **VT** ZIP: _____
- c. **MAILING ADDRESS:** _____
 City/Town: _____ State: **VT** ZIP: _____
- d. **EMAIL:** _____

ARTICLE 7. INITIAL DIRECTOR(S) OPTIONAL AT THIS TIME (REQUIRED ON 1ST BIENNIALREPORT)–IF PROVIDED HERE, MUST PROVIDE A MINIMUM OF 3

- a. **NAME:** _____
 Address: _____
 City/Town: _____ State/Province: _____
 Country: _____ ZIP/Postal Code: _____
- b. **NAME:** _____
 Address: _____
 City/Town: _____ State/Province: _____
 Country: _____ ZIP/Postal Code: _____
- c. **NAME:** _____
 Address: _____
 City/Town: _____ State/Province: _____
 Country: _____ ZIP/Postal Code: _____

CHECK IF APPLICABLE:

This corporation has more than three initial (3) directors. *MUST ATTACH A COMPLETE LIST OF ADDITIONAL PRINCIPLES WITH SIGNATURES.*

ARTICLE 8. EFFECTIVE DATE *OPTIONAL* _____ *MAY BE POST-DATED UP TO 90 DAYS FOLLOWING THE DATE OF RECEIPT*

CERTIFICATION OF DOCUMENT *REQUIRED* I hereby certify under penalty of law (11B V.S.A. §1.29), as the incorporator listed above, that the above information is true and accurate; and that this document is provided in **duplicate** with a **check or money order** for \$125.00 payable to "VT SOS."

_____ Signature of Incorporator	_____ Date
_____ Signature of Director a.	_____ Date
_____ Signature of Director b.	_____ Date
_____ Signature of Director c.	_____ Date

PLEASE REVIEW INSTRUCTIONS PAGE BEFORE FILING.



Vermont Secretary of State
ARTICLES OF INCORPORATION
 of a Vermont Nonprofit Corporation

SUBMISSION INSTRUCTIONS

- a. *This form* must be filed in duplicate (1 original + 1 copy -- 2 originals) with a check or money order, payable to "VT SOS," in the amount of \$125.00, and a self-addressed stamped envelope.
- b. *This form* can **ONLY** be accepted by Mail or In-person at:

**Vermont Secretary of State
 Corporations Division
 128 State Street
 Montpelier, VT 05633-1104**
- c. Please allow 7-10 business days, or more, from the day that *this form* is received in our office, for processing and (if approved) for this business to appear on the website at www.vtsonline.com, and for evidence of filing to be returned.

*****THIS FILING IS NOW AVAILABLE ONLINE*****

- *This form* CANNOT be accepted by Phone, Fax, or E-mail; however, this filing is now available online:
 - If you wish to submit this filing electronically, **DO NOT** fill out *this form*, please file online at:
<https://www.vtsonline.com/online/Account?referrer=BF>.
- Payment for *this form* also CANNOT be accepted by credit card or e-check (ACH); however, payment by credit card or e-check (ACH) is available by filing online:
 - If you wish to submit payment by credit card or e-check (ACH), **DO NOT** fill out *this form*, please file online at:
<https://www.vtsonline.com/online/Account?referrer=BF>.
- Online filing normally takes 3-5 business days or less.

FORM INSTRUCTIONS

- Article 1. Required** a. the Business Name must be *Distinguishable in the Records* of the Secretary of State (as of 7/1/2015). For more information, please see:
<https://www.sec.state.vt.us/corporationsbusiness-services/other-resources/business-name-rules.aspx>
 - b. **A corporation name** (including Benefit and Workers' Cooperative) in accordance with 11A V.S.A. § 4.01:
 - (1) must contain the word "CORPORATION," "INCORPORATED," "COMPANY," or "LIMITED;" or the abbreviation "CORP," "INC," "CO," OR "LTD;" or words or abbreviations of like meaning in another language;
 - (2) may not contain language stating or implying that the corporation is organized for a purpose other than that permitted by section 3.01 of this title and its articles of incorporation;
 - (3) may not have the word "COOPERATIVE" or any abbreviation thereof as part of its name unless the corporation is a worker cooperative corporation organized under 11 V.S.A. Chapter 8;
 - (4) may not include any word not otherwise authorized by law.
 - Article 2a. Required.** Must state the purpose for which this nonprofit corporation is formed.
 - Article 3a. Required.** Must select either IS or IS NOT a member organization.
 - Article 3b. Required.** Must Select either PUBLIC or MUTAL benefit organization. All Nonprofit Corporations are classified as either a public benefit or a mutual benefit corporation as follows (11B V.S.A. § 17.05):
 - a. any corporation classified by statute as a public benefit corporation or a mutual benefit corporation is the type of corporation so classified by statute;
 - b. any corporation which does not come within subdivision (a) of this section but which is recognized as exempt under section 501(c)(3) of the Internal Revenue Code, or any successor section, is a public benefit corporation;
 - c. any corporation which does not come within subdivision (a) or (b) of this section, but which is organized for a public or charitable purpose and which upon dissolution must distribute its assets to the United States, a state or a person which is recognized as exempt under section 501(c)(3) of the Internal Revenue Code, or any successor section, is a public benefit corporation; and
 - d. any corporation which does not come within subdivision (a), (b), or (c) of this section is a mutual benefit corporation.
 - Article 4. Required.** Primary location where business will be conducted under this business name, or primary location where business records will be kept.
 - Article 5. Required.**
 - Article 6. Required.** Must appoint a Registered Agent with a physical address in the state of Vermont.
 - Article 7. Required.** The names and usual business addresses of all initial directors (if any). If provided, must provide the names and residences of at least 3 initial directors.

Note: 1st Biennial Report is due the between January 1 and April 1 of the 1st Calendar Year immediately following registration, then every 2 years thereafter.
 - Article 8. Optional** -- These articles may be postdated up to 90 days from date of receipt.
- Certification:** All directors and/or incorporators named in articles 5 and 7 must sign the articles. (11B V.S.A. § 2.02(c))

For Questions, please contact the Corporations Division at: corps@sec.state.vt.us
 or at (802) 828-2386