



**BASIS OF YOUR APPEAL:** The Department of Revenue has denied your application for the reason or reasons stated in the denial letter. Please state on this form why you believe the Department's determination is incorrect. **YOU MUST COMPLETE EACH SECTION.**

**FACTUAL BASIS OF APPEAL:** You must indicate whether or not each of the facts listed in the denial letter is true. If you do not indicate whether or not a fact is true, it will be presumed that you do not dispute the fact. For each fact that is not true, you must state what is true, and provide documentation or other supporting evidence of the correct fact.

	TRUE	NOT TRUE	IF NOT TRUE, WHAT IS THE CORRECT FACT? Attach any supporting documentation.
FACT #1	<input type="checkbox"/>	<input type="checkbox"/>	_____
FACT #2	<input type="checkbox"/>	<input type="checkbox"/>	_____
FACT #3	<input type="checkbox"/>	<input type="checkbox"/>	_____
FACT #4	<input type="checkbox"/>	<input type="checkbox"/>	_____
FACT #5	<input type="checkbox"/>	<input type="checkbox"/>	_____
FACT #6	<input type="checkbox"/>	<input type="checkbox"/>	_____
FACT #7	<input type="checkbox"/>	<input type="checkbox"/>	_____

Attach additional pages if necessary

**OTHER RELEVANT FACTS THAT SHOULD HAVE BEEN CONSIDERED. IF NONE, WRITE "NONE"**

FACT A: \_\_\_\_\_

FACT B: \_\_\_\_\_

Attach additional pages if there are more relevant facts that should have been considered by the Department.

**LEGAL BASIS OF APPEAL:** You must thoroughly explain why you believe your organization is eligible to be included in the charitable contribution list on the **2020** Permanent Fund Dividend electronic application and cite the appropriate laws.

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**DEADLINE:** This appeal, signed by the appellant, must be received or postmarked on or before the date in the upper right hand corner of the other side of this page. Your appeal will be considered timely if it is received or postmarked by that date. **Late appeals will be denied.** Mail your completed appeal to:

Alaska Department of Revenue  
Dividend Appeals Section  
Contribution List Appeal  
PO Box 110467  
Juneau, AK 99811-0467