



# Form ST-5 Sales Tax Exempt Purchaser Certificate

Rev. 6/09  
**Massachusetts  
Department of  
Revenue**

**Part 1. Exempt taxpayer information.** To be completed by exempt government or 501(c)(3) organization.

Name Miami University


Address 501 E. High Street, 107 Roudebush Hall

City Oxford State Ohio Zip 45056

Exemption number 316 402 089

Issue date 04/15/15 Date of expiration of certificate 04/15/25

Certification is hereby made that the organization named above is an exempt purchaser under Massachusetts General Laws, Chapter 64H, sections 6(d) or 6(e). All purchases of tangible personal property or services by this organization are exempt from taxation under said chapter to the extent that such property or services are used in the conduct of the business of the purchaser. Any abuse or misuse of this certificate by any tax-exempt organization or any unauthorized use of this certificate by any individual constitutes a serious violation and will lead to revocation.

Signature  Title Tax and Compliance Coordinator Date 8/1/16

**Warning: Willful misuse of this certificate may result in criminal tax evasion sanctions of up to one year in prison and \$10,000 (\$50,000 for corporations) in fines.**

**Part 2. Agent information.** To be completed by agent of exempt government or 501(c)(3) organization.

Name of agent's organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Agent's name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I certify that in making this purchase, I am acting as an agent for the exempt organization named above (select one):

- Government organization (local public school, city/town government, state agency, etc.).  
Attach Form ST-2, if available. If Form ST-2 is not available, enter exemption number, if known: \_\_\_\_\_
- 501(c)(3) organization (parochial school, Scout troop, etc.). Form ST-2 must be attached.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**Part 3. Vendor information**

Vendor's name \_\_\_\_\_

- Check applicable box:
- Single purchase certificate (attach detailed receipts or complete Part 4, on reverse)
- Blanket certificate





COMMONWEALTH OF MASSACHUSETTS  
**DEPARTMENT OF REVENUE**  
 PO BOX 7010  
 BOSTON, MA 02204



403C



MIAMI UNIVERSITY  
 501E HIGH ST  
 OXFORD OH 45056-1846

<b>Notice Date:</b>	<b>09/04/15</b>
<b>Taxpayer ID Number:</b>	<b>316 402 089</b>

Dear Taxpayer,

Below please find your Certificate of Exemption (Form ST-2). Please cut along the dotted line and display at your place of business.

Sincerely,

Massachusetts Dept. of Revenue



**Form ST-2  
 Certificate of Exemption**

**Massachusetts  
 Department of  
 Revenue**

Certification is hereby made that the organization herein is an exempt purchaser under General Laws, Chapter 64H, section 6(d) or (e). All purchases of tangible personal property by this organization are exempt from taxation under said chapter to the extent that such property is used in the conduct of the business of the purchaser. Any abuse or misuse of this certificate by any tax-exempt organization or any unauthorized use of this certificate by any individual constitutes a serious violation and will lead to revocation. Willful misuse of this Certification of Exemption is subject to criminal sanctions of up to one year in prison and \$10,000 (\$50,000 for corporations) in fines.

**MIAMI UNIVERSITY  
 501E HIGH ST  
 OXFORD OH 45056-1846**

**EXEMPTION NUMBER  
 316 402 089  
 ISSUE DATE  
 04/15/15  
 CERTIFICATE EXPIRES ON  
 04/15/25**