

State of Vermont

Attached is a copy of the Resale and Exempt Organization Certificate of Exemption for the state of Vermont. To obtain exemption from sales taxes, this form must be completed and given to the supplier at the time of sale of the property sold or service rendered. Please make copies for use and keep one as a master copy.

Where indicated, enter the supplier's name and address and describe the property or service purchased. The form must be signed by an authorized IEEE person. For an IEEE Conference or an IEEE Section/Region/Society/Chapter, this can be an officer of the conference or geographic unit. For IEEE staff, this can be a person with the appropriate expenditure authorization approval for the purchase.

Purchases must be paid for with an IEEE Purchase Card or a check from IEEE, or IEEE Conference, Section, or other IEEE organizational unit bank account. Tax exempt purchases cannot be paid for with cash, personal checks, or personal credit cards.

If you have any questions, please send an email to: tax-compliance@ieee.org



STATE OF VERMONT DEPARTMENT OF TAXES 109 STATE STREET MONTPELIER, VERMONT 05609-1401

RESALE AND EXEMPT ORGANIZATION CERTIFICATE OF EXEMPTION TITLE 32, §9701(5); §9743(1-3)

| Supplier's Name | | | | |
|--|--|----------------------------------|---|--|
| (5 | Street) | (City, Town or PO) | (State and Zip) | |
| () Single Purchase | e - Enter Purchase P | rice \$ | | |
| () Multiple Purcha | ases | | | |
| Description of pure | chased articles: | | | |
| | () Purchased by | y Retailer, Wholesaler for | Resale | |
| Check applicable blocks | (X) Purchase by 501(c)(3) organization which is religious, educational or scientific | | | |
| | () Direct purchase by Governmental Unit | | | |
| | () Purchase by Volunteer Fire Department, Ambulance Company, Rescue Squad (Registration not required) | | | |
| Name of Purchaser: | The Institute of Electrical a | nd Electronics Engineers, Inc. | | |
| Trading as: | | | | |
| | Three Park Avenue, 17th Fl | loor New York | New York 10016-5997 | |
| | (Street) | (City, Town or PO) | (State and Zip) | |
| Vermont Registration Certificate Number: 55671 | | Federal Identif: 13-1656633 | Federal Identification Number: 13-1656633 | |
| | | (Instructions - | 3[d]) | |
| Purchaser's primary | business: Scientific an | d Educational Professional Membe | rship Organization | |
| | | | | |
| the best of my knowledge to the State of the | I am authorized to a ledge and belief, it te of Vermont Sales a | | Exemption and that, to in good faith, | |
| (Signature) | | (Title) | | |
| | | | | |

(If the purchaser is a corporation, an officer of the corporation or other person authorized to sign on behalf of the corporation must sign; if a partnership, one partner must sign; if an unincorporated association, a member must sign; if a sole proprietorship, the proprietor must sign.)

INFORMATION FOR SUPPLIER - A supplier is required to keep this form on file for three years from the date of the last purchase made under the certificate.

REPRODUCTION OF FORM - You may reproduce this form without approval.