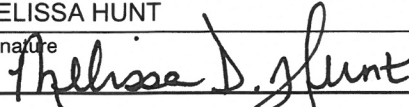


## Declaration of Wholesale or Entity Sales Tax Exemption

1. Purchaser Information		License or Exemption Information	
Legal Name STATE OF WEST VIRGINIA		Sales Tax License or Exemption Number	
Trade Name (if different) WEST VIRGINIA UNIVERSITY		State	Expiration Date
Mailing Address ONE WATERFRONT PLACE PO BOX 6005		Phone Number N/A; EMAIL TAX@MAIL.WVU.EDU	
City MORGANTOWN		State WV	ZIP Code 26506
<b>2. Wholesale Exemption.</b> Mark the type of exemption, and describe your ordinary course of business.			
<input type="checkbox"/> Purchase for Resale  <input type="checkbox"/> Manufacturing - Mark one of the following: <input type="checkbox"/> Ingredients or Component Parts <input type="checkbox"/> Machinery, Machine Tools, and Parts <input type="checkbox"/> Testing, Modification, or Inspection		Ordinary Course of Business, including the product(s) manufactured and/or sold:	
<b>3. Entity Exemption.</b> Enter a and b as required.			
<b>a. Mark the type of entity.</b>			
<input checked="" type="checkbox"/> 501(c)(3) Charitable Organization		<input type="checkbox"/> 501(c)(19) Veterans' Organization	
<input type="checkbox"/> U.S. or Colorado State or Local Government		<input type="checkbox"/> Affordable Housing Project	
<input type="checkbox"/> Tribe or Member – For sales on or delivered to a Colorado reservation. Mark the type of qualifying purchaser:			
<input type="checkbox"/> Tribal Government		<input type="checkbox"/> Enrolled Tribal Member	
<input type="checkbox"/> Entity owned by tribe or member – Enter the total tribal ownership percentage:			
<b>b. Mark the type of qualifying payment, unless the exemption is for a tribal member or entity owned by a tribe or member.</b>			
<input type="checkbox"/> Purchase Authorization to be paid later			
<input type="checkbox"/> Cash with a purchase order from the entity		<input checked="" type="checkbox"/> Check issued by the entity	
<input type="checkbox"/> U.S. Government GSA SmartPay3 Card		<input type="checkbox"/> Colorado State or Local Government Credit Card	
<input type="checkbox"/> Non-Government Credit Card bearing the entity name or branded for commercial use			
<b>4. Other Exemption.</b> Describe the exemption claimed and how your purchase qualifies.			
Exemption Claimed OUT OF STATE CHARITABLE ORGANIZATION, EDUCATIONAL ORGANIZATION		Qualifications EXEMPT ORGANIZATION IN HOME STATE MEETING CHARITABLE ORGANIZATION REQUIREMENTS FOR STATE OF COLORADO	
<b>5. Purchaser Signature</b>			
I declare that the purchases I make using this form qualify for exemption from Colorado sales and use taxes as entered above, and that I am the purchaser or have the authority to execute this form on behalf of the purchaser.			
Printed Name MELISSA HUNT		Title DIRECTOR, TAX SERVICES	
Signature 		Date (MM/DD/YY) 1/2/2025	