

South Dakota Streamlined Sales Tax Agreement Certificate of Exemption

Warning to purchaser:

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that is due tax on this sale. The state that is due tax on this sale may be notified that you claimed exemption from sales tax.

The purchaser will be held liable for any tax and interest, and possible civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption.

1. Check if you are attaching the Multistate Supplemental form.
 SD If not, enter the two-letter abbreviation for the state under whose laws you are claiming exemption.
2. Check if this certificate is for a Single Purchase Certificate. Invoice/purchase order # _____

3. **Print or type**

A. Name of purchaser NORTHEAST EDUCATIONAL SERVICES COOPERATIVE			
B. Business address	City	State	Zip code
310 5TH ST. PO BOX 327	HAYTI	SD	57241-0327
C. Purchaser's tax ID number	State of Issue	County of Issue	
46-0360461	SD	HAMLIN	
D. If no tax ID number, enter FEIN			
E. If no ID number or FEIN, enter Driver's License Number/State Issued ID number			state of issue
F. Foreign diplomat number			
G. Name of seller from whom you are purchasing, leasing or renting			
H. Seller's address	City	State	Zip code

4. **Circle type of business**

Purchaser's Type of business. Circle the number that best describes your business.

01 Accommodation and food services	11 Transportation and warehousing
02 Agriculture, forestry, fishing, hunting	12 Utilities
03 Construction	13 Wholesale trade
04 Finance and insurance	14 Business services
05 Information, publishing and communications	15 Professional services
06 Manufacturing	16 Education and health-care services
07 Mining	17 Nonprofit organization
08 Real estate	18 Government
09 Rental and leasing	19 Not a business
10 Retail trade	20 Other (explain) <u>PUBLIC SCHOOL DISTRICT</u>

5. **Circle reason for exemption**

Reason for exemption. Circle the letter that identifies the reason for the exemption.

A Federal government (Department) _____	H Agricultural
<input checked="" type="radio"/> B State or local government (Agency) <u>SCHOOL DISTRICT</u>	I Industrial production/manufacturing <u>Does not apply in SD</u>
C Tribal government	J Direct pay permit
D Foreign diplomat	K Multiple points of use (services, digital goods, or computer software delivered electronically)
E Charitable organization	L Direct mail
F Religious or educational organization	M Other (Explain) _____
G Resale	

6. **Sign here**

I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.

Signature of authorized purchaser: Tiffany Stormo Print name here: Tiffany Stormo Title: Business Manager Date: 7/1/2023