



Vermont Sales Tax Exemption Certificate
for

**PURCHASES FOR RESALE, BY EXEMPT ORGANIZATIONS, AND
BY DIRECT PAY PERMIT**

**Form
S-3**

32 V.S.A. § 9701(5); § 9743(1)-(3); § 9745

To be filed with the ***SELLER***, not with the Vermont Department of Taxes.

☐ Single Purchase - Enter Purchase Price \$ _____

☒ Multiple Purchase (effective for subsequent purchases.)

BUYER

Buyer's Name University of Vermont and State Agricultural College 4-H Program Inc		Federal ID Number 30-0895381	
Trading as UVM Extension Community Partners		Telephone Number	
Address 146 University Place			
City Burlington	State VT	ZIP Code 05405	
Buyer's Primary Business Higher Education			

SELLER

Seller's Name		
Address		
City	State	ZIP Code

EXEMPTION CLAIMED

DESCRIPTION. Description of purchased articles	
BASIS FOR EXEMPTION	
☐ For resale/wholesale Vermont Sales & Use Tax Account Number: _____	
☒ Purchase by 501(c)(3) organization Vermont Account Number: <u>SUT-10889304</u>	
☒ Direct payment by federal or Vermont governmental unit	
☐ Direct Pay Permit Permit #: _____	
☐ Purchases by 501(c)5 organization presenting fairs, field days, or festivals. Events: _____	
. Dates: _____	
. Vermont Sales & Use Tax Account Number: _____	
☐ Purchase by volunteer fire department, ambulance company, rescue squad. (Registration is not required.)	

SIGNATURE

I certify that I have read and complied with the instructions provided with respect to the use of this Exemption Certificate. I further certify that the above statements are true, complete, and correct, and that no material information has been omitted.



Signature of Buyer or Authorized Agent

University Controller

Title

October 29, 2025

Date