

## MA ST-5 & Instructions

If a vendor requests that you provide the ST-5 for Tax Exemption:

- Please follow the instructions below in order to complete and sign Parts 2 and 3 on the attached ST-5 form.
- **Part 2 Help:**
  - The “**Name of Agent’s Organization**” is your School or Department (i.e. Athletics Department, University of Maine System).
  - The “**Agent’s Address**” is the primary address for your school or department at the University of Maine System.
  - The “**Agent**” is you, the Administrator/Coordinator who is requesting the tax exemption form which will be signed by you.
  - Please complete, sign electronically, and date.
- **Part 3 Help:**
  - Enter the name of the vendor, or organization, and their address (if applicable).
  - Select the correct box pertaining to your purchase or engagement with the vendor.
    - **Blanket Certificate** – Select for “multiple purchases” with the same vendor over a two-year period.
    - **Single Purchase Certificate** – Select for “one-time only” transaction with the vendor.
  - Note: For Single Purchase Certificates, prior to submitting the finalized/signed ST-5 document to the vendor, go to page two and complete Part 4. The vendor will also require a purchase receipt.



# 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  
UNIVERSITY OF MAINE SYSTEM

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Address  
5703 ALUMNI HALL STE 101

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City  
ORONO

State  
ME

Zip  
04469-5703

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Exemption number  
1685047296

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Issue date  
FEBRUARY 21, 2018

Date of expiration of certificate  
FEBRUARY 21, 2028

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  
*Janis Tremore*

Title  
Assistant Director of Accounting

Date  
3/15/2022

**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

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Address

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City

State

Zip

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Agent's name

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Address

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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

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

