

Exempt Organization Certificate**ST-119**

(8/02)

The organization named below is exempt from payment of the New York State and local sales and use tax.

The number shown on this certificate must be entered on any Form ST-119.1, *Exempt Organization Exempt Purchase Certificate*, presented to a vendor. If this certificate is lost or destroyed, you may obtain a replacement by notifying the Exempt Organizations Unit.

This certificate will remain in effect unless it is revoked or canceled. Misuse of the authority granted under this certificate will result in the revocation of exempt status and subject the organization to substantial civil and criminal penalties.

IOWA STATE UNIVERSITY
3616 ADMIN. SERVICES BUILDING
IOWA STATE PURCHASING DEPT.
AMES, IA 50010

Certificate number
EX 144087
Date issued
February 04, 1974

This certificate may not be altered, changed, lent, or transferred to another organization or person.

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Instructions

This certificate must be returned to the Sales Tax Exempt Organizations Unit if the organization changes its organizational structure, activities, organizing document, or bylaws. A reappraisal of the organization's exempt status will be made provided it submits a copy of the applicable amended organizing document or statement of activities.

An organization that changes its structural form, (for example, an association reorganizes as a corporation) must file Form ST-119.2, *Application for an Exempt Organization Certificate*, in order to establish the new entity's status for sales tax exemption.

If only the name or address of the organization changes, complete *A* below and submit a copy of the amendment to your organizing documents that provides for the change of name. If the organization terminates, complete *B* below and return certificate for cancellation.

- A. Change of name or address (A new Form ST-119, *Exempt Organization Certificate*, will be issued to replace this one.)

39767

New name (print or type)			
-			
New address (print or type)	Street	City	State ZIP code

- B. Cancel (state reason) _____ Date _____

Address all correspondence to: NYS Tax Department, Sales Tax Exempt Organizations Unit, W A Harriman Campus, Albany NY 12227-0125.