

E-595E Streamlined Sales and Use Tax Certificate of Exemption

Do not send this form to the Streamlined Sales Tax Governing Board or the NC Department of Revenue. Send the completed form to the seller and keep a copy for your records. This is a multi-state form for use in the states listed. Not all states allow all exemptions listed on this form. The purchaser is responsible for ensuring it is eligible for the exemption in the state it is claiming the tax exemption from. Check with the state for exemption information and requirements. The purchaser is liable for any tax and interest, and possible civil and criminal penalties imposed by the state, if the purchaser is not eligible to claim this exemption.

1 ☐ Check if this certificate is for a single purchase. Enter the related invoice/purchase order # _____

2 A. Purchaser's name
UNIVERSITY OF NORTH CAROLINA SCHOOL OF THE ARTS

B. Business address City State Country Zip code
1533 S MAIN STREET WINSTON-SALE NC ☒ US 27127

C. Name of seller from whom you are purchasing, leasing, or renting _____

D. Seller's address City State Country Zip code _____

3 Purchaser's type of business. Check the number that describes your business.

- | | |
|--|---|
| ☐ 01 Accommodation and food services | ☐ 11 Transportation and warehousing |
| ☐ 02 Agricultural, forestry, fishing, and 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) _____ |

4 Reason for exemption. Check the letter that identifies the reason for the exemption.

- | | |
|---|--|
| ☐ A Federal government (department) _____ | ☐ H Agricultural production # _____ |
| ☒ B State government (name) AGENCY NC | ☐ I Industrial production/manufacturing # _____ |
| ☐ C Tribal government (name) _____ | ☐ J Direct pay permit # _____ |
| ☐ D Foreign diplomat # _____ | ☐ K Direct mail # _____ |
| ☐ G Resale # _____ | ☐ L Other (explain) _____ |

5 Identification (ID) number. Enter the ID number as required in the instructions for each state in which you are claiming an exemption. If claiming multiple exemption reasons, enter the letters identifying each reason as listed in Section 4 for each state.

ID Number	State/Country	Reason	ID Number	State/Country	Reason
AR			NV		
GA			OH		
IA			OK		
IN			RI		
KS			SD		
KY			TN		
MI			UT		
MN			VT		
NC 400044			WA		
ND			WI		
NE			WV		
NJ			WY		

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

Signature of authorized purchaser	Print name here	Title	Date
	SCOTT ROBINSON	DIRECTOR	09-09-26
Phone number	E-mail address		
(336) 770-3319	ROBINSONS@UNCSA.EDU		