

**Do not send this form to the Streamlined Sales Tax Governing Board.
Send the completed form to the seller and keep a copy for your records.**

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 would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or the data elements required on the form) to a state that would otherwise be due tax on this sale.

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. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

1. Check if you are attaching the Multistate Supplemental form.

NJ 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**. Enter the related invoice/purchase order # _____.

3. **Print or type**

A. Name of purchaser
Transcontinental Gas Pipe Line Company LLC

B. Business address City State Zip code
PO Box 2400, MD 46 Tulsa OK 74102

C. Purchaser's tax ID number State of Issue Country of Issue
DP-00384 NJ USA

D. If no tax ID number, enter one of the following: FEIN
74-1079400

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

Circle type of business

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

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

Circle or check reason for exemption

A <input type="checkbox"/> Federal government (Department) _____	H <input type="checkbox"/> Agricultural Production # _____
B <input type="checkbox"/> State or local government (Name) _____	I <input type="checkbox"/> Industrial production/manufacturing # _____
C <input type="checkbox"/> Tribal government (Name) _____	J <input checked="" type="checkbox"/> Direct pay permit # <u>DP-00384</u>
D <input type="checkbox"/> Foreign diplomat # _____	K <input type="checkbox"/> Direct Mail # _____
E <input type="checkbox"/> Charitable organization # _____	L <input type="checkbox"/> Other (Explain) _____
F <input type="checkbox"/> Religious organization # _____	M <input type="checkbox"/> Educational Organization # _____
G <input type="checkbox"/> 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 Rebecca Beard Print name here Rebecca Beard Title Senior Tax Analyst Date 01/01/2023

MAY BE REPRODUCED

ST-6A (9-74, R-1)

To be completed by purchaser and given to and retained by vendor. Read instructions on back of this Certificate.

The vendor must collect the tax on a sale of taxable property or services unless the purchaser gives him a properly completed exemption certificate.

State of New Jersey

DIVISION OF TAXATION
SALES TAX

DIRECT PAYMENT PERMIT NUMBER
DP- 00384

DIRECT PAYMENT CERTIFICATE
FORM ST-6A

TO
(Name of Vendor)

Date

.....
(Address)

Check applicable box:

(City) (State) (Zip)

- Single Purchase Certificate
- Blanket Certificate

The undersigned certifies that:

- (1) He holds a valid Direct Payment Permit (number shown above) to make payment of New Jersey Sales and Use Tax directly to the Division of Taxation rather than to the vendor.
- (2) He is principally engaged in the sale of (Indicate nature of merchandise or service sold)
interstate natural gas pipeline transmission

(3) The tangible personal property or services being herein purchased are described as follows:

(4) Unless this is marked above as a Single Purchase, it shall be considered part of any order given to you, and shall remain in force until revoked by notice in writing to you.

I, the undersigned purchaser, have read and complied with the instructions and rules promulgated pursuant to the New Jersey Sales and Use Tax Act with respect to the use of the Direct Payment Certificate, and it is my belief that the vendor named herein is not required to collect the sales or use tax on the transaction or transactions covered by this Certificate. The undersigned purchaser hereby swears (under the penalties for perjury and false swearing) that all of the information shown in this Certificate is true.

A VENDOR SHOULD READ AND COMPLY WITH THE INSTRUCTIONS GIVEN ON BOTH SIDES OF AN EXEMPTION CERTIFICATE.

Transcontinental Gas Pipe Line Co, LLC
NAME OF PURCHASER (as registered with the Division of Taxation)

By *[Signature]* ^{Mgr.} *Transaction Tax*
(Signature of owner, partner, officer of corporation, etc.) (Title)

P.O. Box 2400 Tulsa, OK 74102
(Address of Purchaser)