



New York State Department of Taxation and Finance  
**New York State and Local Sales and Use Tax**  
**Exempt Organization**  
**Exempt Purchase Certificate**

**ST-119.1**  
 (10/11)

Single purchase certificate

Blanket certificate

Your exempt organization number  
**is not your federal employer**  
**identification number (see instructions).**

Exempt organization number (6-digit number  
 issued by the New York State Tax Department)

EX - 1 | 2 | 3 | 6 | 9 | 8

Name of seller Rapid Air Compressed Air Products/Engineered Specialties, Inc			Name of exempt organization/purchaser Syracuse University		
Street address 6111 Mill Creek Drive			Street address Skytop Office Building, Suite 140 **		
City Auburndale	State WI	ZIP code 54412	City Syracuse	State New York	ZIP code 13244-5300

The exempt organization **must be the direct purchaser and payer of record.**

You may **not** use this form to purchase motor fuel or diesel motor fuel exempt from tax.

**Representatives of governmental agencies or diplomatic missions may not use this form.**

**Carefully read** the instructions and other information on the back of this document.

I certify that the organization named above holds a valid Form ST-119, *Exempt Organization Certificate*, and is exempt from New York State and local sales and use taxes on its purchases.

**Certification:** I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements and issue this exemption certificate with the knowledge that this document provides evidence that state and local sales or use taxes do not apply to a transaction or transactions for which I tendered this document and that willfully issuing this document with the intent to evade any such tax may constitute a felony or other crime under New York State Law, punishable by a substantial fine and a possible jail sentence. I understand that this document is required to be filed with, and delivered to the vendor as agent for the Tax Department for the purposes of section 1838 of the Tax Law and is deemed a document required to be filed with the Tax Department for the purpose of prosecution of offenses. I also understand that the Tax Department is authorized to investigate the validity of tax exclusions or exemptions claimed and the accuracy of any information entered on this document.

Print or type name of officer of organization Jean B. Gallipeau	Title Comptroller
Signature of officer of organization <i>Jean B. Gallipeau</i>	Date issued 01/8/2024

**Need help?**



Visit our Web site at [www.tax.ny.gov](http://www.tax.ny.gov)

- get information and manage your taxes online
- check for new online services and features



**Telephone assistance**

Sales Tax Information Center: (518) 485-2889

To order forms and publications: (518) 457-5431



**Text Telephone (TTY) Hotline** (for persons with hearing and speech disabilities using a TTY): If you have access to a TTY, contact us at (518) 485-5082. If you do not own a TTY, check with independent living centers or community action programs to find out where machines are available for public use.



**Persons with disabilities:** In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, call the information center.