



State of Rhode Island

Division of Taxation - **Field Audit Section**

-One Capitol Hill

Providence, RI 02908-5800

**Application for Sales Tax Exemption
for Artistic Works**

Please Type or Print			
Federal Employer Identification # or Social Security #	Home Phone #		
Name (of Business or Corporate Name if Incorporated)	Business Telephone #		
Business Name (if different than above)	Sales Tax Permit #		
Business Address	City	State	Zip Code
Residence Address (include Apt., Office or Unit # if any)	City	State	Zip Code
Mailing Address (include Apt., Office or Unit # if any)	City	State	Zip Code
Description of Artistic Work(s) for which Exemption is sought:	FOR OFFICE USE ONLY		
1	EXEMPTION #		
2			
3			
4			
5			
6			
7			
Attach additional sheets if necessary			
<i>I certify, under penalty of perjury, that I am a (resident)/(art gallery located) within the defined economic development zone and that the artistic work(s) will be sold from the business address shown above.</i>			
Date	Signature(s) of Applicant(s)	Title	
Print or type name(s)			
<p>NOTE:</p> <p>If application for exemption is made by an individual, a Certification of Residency within the defined economic development zone issued by the applicable City must be submitted with this application.</p>			