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STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
**FIVE YEAR EXEMPTION EXTENDED TO
UNRELATED PURCHASER**

PT-444
(Rev. 11/18/21)
7073

Company name BOSTIK, INC. FEIN/SSN _____
Company address c/o RYAN 100 CONGRESS AVE City AUSTIN State TX ZIP 78701
County GREENVILLE Tax map #s _____
Date of acquisition 03/01/2022 Acquired from ASHLAND LLC
SID number of purchaser 1554303-003 SID number of seller 2303717-003

The undersigned company/corporation requests that the five year partial exemption allowed to the seller of the facilities be extended to it. The undersigned company official hereby affirms on behalf of the company that:

- 1. it is an unrelated purchaser who acquired the facilities in an arms-length transaction
- 2. it is preserving the existing facility, and
- 3. it is preserving the existing number of jobs totaling All jobs (number of jobs)

Signature of company official (purchaser) Greg Wood (Tax Agent)
Printed name Greg Wood Phone number 412-535-4400

To be completed by the County Council Chairman

The County Council Chairman has reviewed this request for extending the exemption to:

Real property	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny	County Council Chairman's initials _____
Personal property	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny	County Council Chairman's initials _____

County Council Chairman signature _____ Printed name _____
County Council Chairman street address _____
City _____ State _____ ZIP _____ Phone number _____

In future years, the county must notify the SCDOR if existing facilities and jobs are not preserved.

Relevant SC Code Sections

SC Code Section 12-37-220 (C): Allows the five year partial exemption from SC Code Sections 12-37-220 (A)(7), (B) (32), and (B)(34) to be extended to an unrelated purchaser who acquires the facilities in an arms-length transaction and preserves the existing facilities and existing number of jobs.

SC Code Section 12-37-220 (A)(7): Establishes a five year exemption from non-school county ad valorem property tax for all new manufacturing facilities and additions to established facilities in South Carolina. The cost of any addition must be \$50,000 or more.

SC Code Section 12-37-220 (B)(32) and (B)(34): Establishes a five year exemption from non-school county ad valorem property tax for all new corporate headquarters, corporate office facilities, distribution facilities, research and development facilities, and additions to these facilities. The new construction or addition cost must be \$50,000 or more and 75 or more full time or 150 or more equivalent jobs must be created in South Carolina.

See the full code sections at dor.sc.gov/policy.

Mail completed form, including the County Council Chairman's signature, to:
SCDOR, Property Manufacturing Section, Columbia, SC 29214-0740

Do not mail this form with your PT-300 Property Tax Return.

70731021



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
**POWER OF ATTORNEY AND
DECLARATION OF REPRESENTATIVE**

Part I Power of Attorney

1 Taxpayer Information (Note: Taxpayer(s) must sign and date this form on page 2, line 8.)

* Taxpayer name(s) and address (Type or print.) Bostik, Inc. 11320 West Watertown Plank Road Wauwatosa, WI 53228	* Social Security number(s)	* Employer identification number 39-0279330
		Plan number (if applicable)
	* Daytime telephone number (610) 205-7656	Email Address

hereby appoint(s) the following representative(s) as attorney(s) - in fact:

2 Representative(s) (Type or print.)

* Name and address of specific individual Greg Wood - Ryan, LLC One PPG Place, Suite 2810 Pittsburgh, PA 15222	* Telephone No. (919) 219-5605 Fax No. (412) 535-4403 Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/>
Name and address of specific individual	Telephone No. () _____ Fax No. () _____ Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/>
Name and address of specific individual	Telephone No. () _____ Fax No. () _____ Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/>

to represent the taxpayer(s) before the SC Department of Revenue for the following tax matters:

3 Tax Matters - A general reference to "All years," "All periods," or "All taxes" is not acceptable.

* Type of Tax (Individual, Corporate, Withholding, Sales, etc.)	* Tax Form Number (SC1040, WH1605, ST-3, etc.)	* Year(s) or Period(s) (See Line 3 Instructions)
Property	PT-300 and all schedules	2009-2023
Property	Real Estate Appeals	2009-2023
Real and Personal Property	All Filot documentation, contracts and other related	Implementation thru 2023

4 Acts Authorized - A representative is an individual authorized to receive and inspect confidential tax information and to perform any and all acts on behalf of the taxpayer with respect to the tax matters described in line 3, including the authority to sign any agreements, consents or other documents. You may not use a Power of Attorney form to authorize a representative to receive refund checks. You may authorize a representative to sign a return ONLY as set forth in South Carolina Code Section 12-2-75.

List any specific additions to or deletions from the acts otherwise authorized in this power of attorney: _____

5 Receipt of Refund Checks - If you want to authorize a representative named in line 2 to receive, BUT NOT TO ENDORSE OR CASH refund checks, Initial here _____ and list the name of that representative below.

Name of representative to receive refund check(s) ▶ _____

6 Retention/Revocation of Prior Power(s) of Attorney - The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the South Carolina Department of Revenue for the same tax matters for years or periods covered by this document .

If you do not want to revoke a prior power of attorney, check here

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

7 Signature of Taxpayer(s) - If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested; otherwise, see the instructions for SC2848 concerning signature of taxpayer(s). If signed by a corporate officer, partner, guardian, tax matters partner/person, LLC members, executor, receiver, personal representative, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

▶ The Department will not accept a Power of Attorney that is not signed.

* Katie C. Rasmussen * 05/18/2022 Assistant Treasurer
Signature Date Title (if applicable)

* Katie C. Rasmussen
Print Name

Signature Date Title (if applicable)

Print Name

NOTICES AND COMMUNICATIONS

All Notices and Communications will be sent to the taxpayer only. However, if you are unable to forward a copy to your named representative, you may contact our office for assistance.

Part II Declaration of Representative

I declare that:

- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified; and
- I am one of the following:
 - a Attorney - a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b Certified Public Accountant - duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c Enrolled Agent - enrolled as an agent under the Requirements of the US Treasury Department Circular No. 230.
 - d Officer - a bona fide officer of the taxpayer organization.
 - e Full-Time Employee - a full-time employee of the taxpayer.
 - f Family Member - a member of the taxpayer's immediate family (i.e., spouse, parent, child, brother, or sister).
 - g Return Preparer.
 - h Other, please explain. _____

▶ The Department will not accept a Declaration of Representative that is not signed.

I declare that this return and all attachments are true, correct and complete to the best of my knowledge and belief. To willfully furnish a false or fraudulent statement to the Department is a crime.

* Designation - Insert above letter (a-h)	* Jurisdiction (state)	* Signature	* Date
b	NC	<u>Greg Wood</u>	<u>5-18-2022</u>

* indicates required field.