FORM WILL NOT BE PROCESSED IF NOT SIGNED OR COMPLETED BY VENDOR. Georgia State University (GSU) is fulfilling a mandate associated with IRS.

RETURN TO GSU PURCHASING DEPT FAX: 404-413-3165 PO BOX 4016

GEORGIA STATE UNIVERSITY

SUBSTITUTE W-9 & VENDOR AUTHORIZATION FORM

DO NOT SEND TO IRS

PO BOX 4016 ATLANTA, GA 30302		SUBSTITUTE W-9 &	VENDO	K AUTHORIZA	ATION FOR	M			
Foreign persons who are no Form W-8 BEN available at					GSU Substi	tute W-9	form	. Instead, comp	ete IRS
► Taxpayer Identification I	Number	r (TIN)						mployer ID Num	
							So	ocial Security Nu	ımber (SSN)
► LEGAL NAME: (must match TIN above)									
► LEGAL MAILING									
ADDRESS: (Where tax information and general correspondence is to be sent)									
DBA/Branch/Location:									
ADDRESS:									
ADDRESS LINE 2:									
CITY:			ST:		ZIP:				
TELEPHONE #:		FAX #:	51.	E-MAII	<u> </u>	I			
► REMIT TO ADDRESS: Same as Legal Mailing Address									
DBA/Branch/Location:		Saint as Legal Framing Address							
ADDRESS:									
ADDRESS LINE 2:									
CITY:			ST:		ZIP:				
► ENTITY TYPE			1 ~ 1 .	L	1	L			
☐ Individual (not a business)	☐ Individual/Sole proprietor			orporation	Partnership			LLC-Limited Liability Company	
SECTION 1 - FEDERAL INFORMATION - REQUIRED									
What is the <u>Federal classification type of your business?</u> - See definitions on link below. (State of Georgia Small Business definition) http://www.georgia.org/BuinessInGerogia/SmallBusiness/WomenMinoritiesYouth/Pages/degault.aspx									
definition) http://www.georgia.org/ bunicssinoerogia/sinanbusiness/ women/miorities routi/rages/degauit.aspx									
OWNERSHIP AND/OR SBA CATEGORY-MUST SELECT AT LEAST ONE-FORM WILL NOT BE PROCESSED IF INCOMPLETE. Please check all that apply to your business:									
		☐ Small Business					¬		
☐ Large Business☐ Historically Black College	☐ Minority Status ☐ Individual/Guest/Visitor ☐ African American ☐ Individual/Consultant/								
Government/Non Profit Small Business – SBA Certified Asian American Service Provider									
Minority Designated University Disadvantaged – SBA Certified Hispanic/Latino Faculty/Student/Staff									
☐ Private University (Must complete minority status) ☐ Native American candidate ☐ Public University ☐ Pacific Islander ☐ Veteran – SBA Certified									
Hub Zone – SBA Certified	d	Service Disabled Veterar	n – SBA				☐ Vie	tnam Veteran –	SBA Certified
SECTION 2 - CONFLICT OF INTEREST - REQUIRED									
Are you or is any Officer, Owner or Partner in this company an employee of Georgia State University? Yes No									
► CERTIFICATION Under penalties of perjury, I certify the	not.								
 The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me I am no longer subject to backup withholding, 									
3. I am a U.S. person (including a resident alien). Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.									
The Internal Revenue Service does		re your consent to any provision o	of this do	cument other tha	n the certifica	tion requir	ed to a	void backup withho	lding
Signature of U.S. Individual				Date:					