

# Individual/Sole Proprietorship Payee Substitute W-9 Form

**Request Type**

SEC 1	<input type="checkbox"/> New Set Up <input type="checkbox"/> Change Existing Information
-------	--

**Payee Information**

SECTION 2	<b>Are you a US citizen or permanent resident?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "NO", please contact the Procurement &amp; Strategic Sourcing Department at (512) 245-2521 or by email at vendorrequests@txstate.edu</i>	
	<b>Individual/Company/U.S. Entity Legal Name</b>	
	<b>DBA (if applicable)</b>	
	<b>Taxpayer ID#</b>	<b>or SSN</b>
	<b>NIGP Commodity Code:</b>	
	<b>Identify the goods and/or services your organization will provide to the University:</b>	

**Vendor Type – please select the type that applies**

SEC 3	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship or single-member LLC
-------	---

**Vendor Information/Mailing Address (Please list the remit address as it appears on an invoice)**

SECTION 4	<b>Mailing Address:</b>			<b>Remit Address:</b>		
	<b>City</b>	<b>State</b>	<b>Zip</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
	<b>Email</b>			<b>Phone</b>		

**Payment Type**

SEC 5	<input type="checkbox"/> ACH (If selecting ACH Method, please also complete the Direct Deposit Authorization Form) <input type="checkbox"/> Check
-------	---

**University Contact**

SECTION 6	<b>Name</b>	<b>Phone</b>
	<b>Email</b>	<b>Department</b>

Certification: Under Penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number.
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the 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 that I am no longer subject to backup withholding.
3. I am a U.S. citizen or other U.S. person.

**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 failed to report all interest and dividends on your tax return. For real estate transactions, item 2 above does not apply.

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Instructions for Individual/Sole Proprietorship Payee Substitute W-9

This form is required by Texas State University to make payments to any vendor. As per the Internal Revenue Services (IRS) regulations, you are required to provide Texas State University with a valid Tax Identification Number (TIN). Proper TIN's include Social Security Number (SSN) or Federal Employer Identification Number (FEIN).

**You have certain rights** under Chapters 552 and 559, Government Code, to review, request and correct information we have on file about you

### Section 1: Request Type

Select the appropriate type of request.

### Section 2: Payee Information

Enter your Legal Name as found on your IRS documents and the corresponding Tax Identification Number. If operating as a DBA, enter the name in the DBA field, otherwise leave blank. Indicate the goods or services your business will be providing to the University in the designated area.

*\*Federal Privacy Act Statement*

*Disclosure of your Social Security number is required and authorized under law, for the purpose of tax administration and identification of any individual affected by applicable law, 42 U.S.C. sec. 405(c)(2)(C)(i); Texas Govt. Code Sections 403.011, 403.056, and 403.078. Release of information on this form in response to a public information request will be governed by the Public Information Act, Chapter 552, Government Code, and applicable federal law.*

### Section 3: Vendor Type

Select which vendor type applies to you. This information identifies how the vendor will be taxed per the IRS.

### Section 4: Vendor Information/Mailing Address

Enter your contact Information. Enter your mailing address and remit to address (if applicable). If the mailing address and the remit to address are the same, complete the mailing address only. When completing the remit to address information, please ensure that it matches what the invoice will read to avoid delay in payment. An email address is required in order for this form to be processed.

### Section 5: Payment Type

Select the type of payment you would prefer. Please note, if you select to receive payments via ACH, the Direct Deposit Authorization form must also be completed. To get information regarding the Virtual Payment Cards, please contact the Purchasing Department at purchasing@txstate.edu or (512) 245-2521.

### Section 6: University Contact

Enter the person with Texas State University that you will be providing goods and/or services for. This person will be contacted once the Payee Substitute W-9 has been processed.

**The form must be signed or it will be considered invalid.**

Please return completed form to Procurement & Strategic Sourcing by one of the following methods.

**Mail:**

Texas State University, Procurement & Strategic Sourcing  
601 University Dr., JCK 527  
San Marcos, TX 78666  
Fax: 512.245.2393

Email: vendorrequests@txstate.edu

For questions, please contact our office at vendorrequests@txstate.edu.