

RETURN TO GSU  
PURCHASING DEPT  
FAX: 404-413-3165  
PO BOX 4016  
ATLANTA, GA 30302

**GEORGIA STATE UNIVERSITY**  
SUBSTITUTE W-9 & VENDOR AUTHORIZATION FORM

**DO NOT SEND TO IRS**

Foreign persons who are non-residents for US Tax purposes do not complete the GSU Substitute W-9 form. Instead, complete IRS Form W-8 BEN available at <http://www.irs.gov/pub/irs-pdf/fw8ben.pdf>

▶ Taxpayer Identification Number (TIN)

Employer ID Number (EIN)

Social Security Number (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 NUMBER:

FAX NUMBER:

E-MAIL ADDRESS:

▶ REMIT TO ADDRESS:

Same as Legal Mailing Address

DBA/Branch/Location:

ADDRESS:

ADDRESS LINE 2:

CITY:

ST:

ZIP:

▶ ENTITY TYPE

Individual (not a business)

Individual/Sole proprietor

Corporation

Partnership

LLC-Limited Liability Corporation

**SECTION 1 - FEDERAL INFORMATION - REQUIRED**

What is the classification of your business? - See definitions on link below. (State of Georgia Small Business definition )  
<http://www.georgia.org/BusinessInGeorgia/SmallBusiness/WomenMinoritiesYouth/Pages/default.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:**

Large Business

Historically Black College

Government/Non Profit

Minority Designated University

Private University

Public University

Hub Zone – SBA Certified

Small Business

Women Owned

Small Business – SBA Certified

Disadvantaged – SBA Certified  
(Must complete minority status)

Pacific Islander

Service Disabled Veteran – SBA Certified

Minority Status

African American

Asian American

Hispanic/Latino

Native American

Veteran – SBA Certified

Viet Nam Veteran – SBA Certified

Individual/Guest/Visitor

Individual/Consultant/  
Service Provider

Faculty/Student/Staff  
candidate

**SECTION 3 - CONFLICT OF INTEREST - REQUIRED**

Are you or any Officer, Owner or Partner in this company an employee of Georgia State University?  Yes  No

▶ CERTIFICATION

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me),
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 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 not require your consent to any provision of this document other than the certification required to avoid backup withholding**

Signature of U.S. Individual

Date:

01/03/2012

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