# NORTHWESTERN STATE UNIVERSITY VENDOR CREATE/MODIFICATION DOCUMENT

Email Form to: purchasing @nsula.edu

Create New Vendor OR		Formation for Existing Vendor Number	
	Vendor Na	me	
	*Is the Exi	sting Vendor an Employee or Student? Yes (past or present)	No
Vendor Type (choose all that apply)			
Purchasing (FTMVEND)	Professional Ser	vices (FTMVEND) Agency/Grantor (FTMAG	GCY)
Reason to create or modify:			
ORDER MAILING ADDRE	ESS	PAYMENT REMIT ADDRESS (Only if Different from Mailing Address)	3
Vendor Name:	(60)	Vendor Name:	(60)
Federal Tax ID/Social Security Number:		Federal Tax ID/Social Security Number:	` ,
Order From Address:	(75)	Remit To Address:	(75)
	(75)		(75)
City:	(50)	City:	(50)
State:		State:	
Zip Code:	(30) (18)	Zip Code:	(30) (18)
Telephone:	(10)	Telephone: Ext:	(10)
Fax:	(18)	Fax:	(18)
Vendor Contact:		Vendor Contact:	
	(35)		(35)
E-Mail (Typed):	(35)	E-Mail (Typed):	(35)
	(33)	Vendor's Terms:	(33)
		(Example 2%-10, Net 30)	
Note: Figures in Parenthesis Indicate Field Limits			
Requested by:		Ext #	
Purchasing Department Approval:			
Vendor Number Assigned:			
Employee or Student Address Change – if so	o, forward a con	by to Human Resources Date:	



## Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.															
	1	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)													
	2 Business name/disregarded entity name, if different from above.														
Print or type. See Specific Instructions on page 3.	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.    Individual/sole proprietor						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any)  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)								
P <sub>1</sub> Specific	3b	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions					(Applies to accounts maintained outside the United States.)								
See	5	Address (number, street, and apt. or suite no.). See instructions.  Requester's name							and address (optional)						
	6	6 City, state, and ZIP code													
	7	List account number(s) here (optional)													
Par	t I	Taxpayer Identification Number (TIN)													
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other				Social security number											
						_			- [						
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>						_				-	'				
TIN, later.				loyer	r identification number										
<b>Note:</b> If the account is in more than one name, see the instructions for line 1. See also <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.					_	-									
Par	Ш	Certification													
Under	ре	nalties of perjury, I certify that:													
	•	mber shown on this form is my correct taxpayer identification number (or I am waiting for	a numbe	er to b	e iss	ued	to me	e): an	d						
2. I an Ser	n no	t subject to backup withholding because (a) I am exempt from backup withholding, or (b) (IRS) that I am subject to backup withholding as a result of a failure to report all interest or subject to backup withholding; and	I have n	ot be	en no	otified	d by t	he In	iterna						
3. I an	ı a	J.S. citizen or other U.S. person (defined below); and													
4. The	FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportir	ng is corr	ect.											
		ion instructions. You must cross out item 2 above if you have been notified by the IRS that you have failed to report all interest and dividends on your tax return. For real estate transactive										aid,			

acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

#### **General Instructions**

Signature of

U.S. person

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments**. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

#### What's New

Sign

Here

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

### **Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Date