Florida State University
Substitute IRS Form W-9 and Vendor Authentication

General Form Notes

- Fields with an asterisk (*) are required fields.
- Clicking the **Next** button at the bottom of the page will save the properly completed page and advance to the next page. Blank required fields or incorrectly entered fields must be entered before advancing to the next page.
- The form will be available for editing, until it is submitted. After submission, a new form can be started. Submitted forms cannot be retrieved and edited.

One Description MUST be selected.

Other – If unsure, check Other and enter brief description.

Supplier Information

Legal Name* - Full first and last name of supplier primary contact

Business Name – Name of business if different from Legal Name. Not required for Research Participant or Honorarium. May be required for Providing Goods and/or Services, College of Medicine or Other.

Name of FSU contact you are working with regarding a purchase* - Name of FSU employee at the department or college requesting the completed form.

Email of FSU contact you are working with regarding a purchase* - Email of FSU employee requesting the completed form.

Phone number of FSU contact you are working with regarding a purchase* - Phone number of FSU employee requesting the complete form.

Briefly describe the commodities or services you sell/provide* - Required for Providing Goods and/or Services and Other. Otherwise, enter the “appropriate description” selected above.

Approximate dollar amount for this purchase* - Required for Providing Goods and/or Services and Other. For other, enter $1 or the amount if known.
Student/Employee

Are you currently an FSU student? *

Yes (Describe)  

No  

At the present time, to the best of your knowledge, are you or any member of your company an employee of FSU? All suppliers must be in compliance with Chapter 112, Florida Statutes: *

Yes (Describe)  

No  

Student - If you are currently an FSU student, check Yes and enter the type, such as Undergraduate or Masters. If not a student, then select No. If you are a student, you may need to be paid through Student Business Services.

Employee – Check Yes, if you or a member of your company is an employee of FSU. If Yes, enter where you or they are employed and review the link to Chapter 112 to ensure there is no conflict of interest.

Entity Type

Select your Entity Type:

Individual/Sole Proprietor or Single Member LLC

If unsure about Entity type, it should be specified on the Employer Identification Number (EIN) notice received from the IRS.

Exemptions section can be left blank.

Tax Status and Exemptions

An IRS issued tax number MUST be provided, otherwise, FSU cannot accept the application.

Employer Identification Number (EIN) – C Corporations, S Corporations, Partnerships, Trust/Estates, Government Entities, Tax Exempt, Other must use an EIN number.

The number will always be a 9-digit number. Enter the number without any hyphens.
### Vendor Contact Information

<table>
<thead>
<tr>
<th>Street Address *</th>
<th>Tallahassee</th>
</tr>
</thead>
<tbody>
<tr>
<td>City *</td>
<td>Tallahassee</td>
</tr>
<tr>
<td>State *</td>
<td>FL</td>
</tr>
<tr>
<td>Zip *</td>
<td>32306</td>
</tr>
<tr>
<td>Main Business Contact *</td>
<td>Your Name Here</td>
</tr>
<tr>
<td>Main Business Contact Email *</td>
<td>Your Email Address Here</td>
</tr>
<tr>
<td>Phone (include area code) *</td>
<td>955-645-0000</td>
</tr>
</tbody>
</table>

### Other Addresses

Other Addresses

(Only if different from above. Click Next to provide Address(4x))

- [ ] Remit Payments
- [ ] Corporate
- [ ] Mailing

### Federal, Small and/or Minority Classification Information

For the four sections, Federal Classification, State of Florida Certified Minority Business Enterprises (CMBE), (NCMBE) Non-Certified, and Non-Profit Organization, None/Not Applicable should be selected for Research Participants, Honorarium and College of Medicine.

**Federal or State Certification - Left blank for Research Participants, Honorarium and College of Medicine**

<table>
<thead>
<tr>
<th>Federal Classification *</th>
<th>State of Florida Certified Minority Business Enterprises (CMBE) *</th>
<th>(NCMBE) Non-Certified</th>
<th>Non-Profit Organization *</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Non-Profit Organization</td>
<td></td>
<td></td>
<td>4. Other Non-Profit</td>
</tr>
<tr>
<td>5. Other Government</td>
<td></td>
<td></td>
<td>5. Not Applicable</td>
</tr>
</tbody>
</table>

*If you selected a classification that is certified by Federal or State agencies, please upload your certificate in the following page of the form. To determine your Federal Small Business status, please access the US Small Business Administration’s website: [www.sba.gov](http://www.sba.gov). To look up your Non-American Minority Classification System (CMS), please access the IRS Charities website: [www.irs.gov](http://www.irs.gov).*
Payment Method Information

The default payment method that does not require additional information is Check.

To use Direct Deposit or Single Use Virtual Visa Card will require additional information.

Direct Deposit will require Payee bank account information and a scanned copy of a voided check.

Single Use Virtual Visa Card will require the Payee to setup a free VCard account so Wells Fargo will know where to send the payment.

Direct Deposit

Checking Account Number* - FSU can only make direct deposits to checking accounts on US Banks. The number does not have a fixed number of digits, but it may have leading zeroes.

Transit/Routing Number* - The bank routing number will ALWAYS have 9 digits and may have leading zeros.

Electronic Remittance Advise E-Mail – E-Mail address where a notice will be sent whenever a direct deposit payment is made.
The V-Card payment method is a convenient way to receive payments, if the supplier can accept credit card payments.

FSU’s normal payment terms are Net 40, but V-Card is paid Net 14.

The supplier will need to register with Wells Fargo, so Wells Fargo will know where to send the payment information.

If this method is chosen, FSU will be in further contact to complete the setup process.

If supplier agrees and understands the E-Payments Sign-Up, check the 4 boxes. If there is an issue with any component of the V-Card, change the selection back to Check or Direct Deposit.

Payment Deliver Email* - email address where Wells Fargo will deliver the payment information

Payment Deliver Phone Number* - Phone number of the Contact Person below.

Payment Deliver Contact Person* – Person to contact if there is an issue with a payment.

Document Upload

Upload any relevant or requested scanned documents.

If Direct Deposit was selected, upload a scanned or photographed copy of a voided check.
Certification

Under the penalties of perjury, I certify that:
1. The number shown on this form is my correct taxpayer identification number (or I am seeking for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I have not otherwise 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 (b) the IRS has notified me that no such information is being reported to it; and
3. I am a U.S. citizen or other (3) person (defined below) and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Sign and Title Below

Printed Name*:
[Field]

Title*:
[Field]

Signature of Authorized Person With Vendor

You agree your electronic signature is the legal equivalent of your manual signature on this agreement.

[Signature]

5/7/2021

Enter your name in the field Printed Name*. If you are entering the information on behalf of a company, please enter your Title*. If you are an individual, enter the type of supplier from Page 1

Enter your signature facsimile in the Signature field.

After completing the form online, a copy of the responses can be downloaded by clicking on the Download PDF link on the upper right corner of the page.

You can also scroll through the completed form to confirm your responses and make any changes if necessary.

After reviewing the form and making any corrections, click Next button at the bottom of the page and the system will submit the form.