



New Supplier W-9 Form

Federal law requires that we have on file a W-9 form with the Employer ID number or Social Security number and signature for each person to whom the University makes payment. Please return this form to the address above, or email to secure address above, or supplier@uvm.edu.

We require either the individual's name/Social Security number OR the company's name/Federal Employer ID number, as they appear on your income tax return.

PLEASE PRINT LEGIBLY. FORM MUST BE COMPLETE TO BE PROCESSED.

Name (As shown on your income tax return)		
Business Name (if different from above)		
Federal EIN <u>OR</u> Social Security #		
Check only ONE federal tax classification: <input type="checkbox"/> Individual, Sole Proprietor or Single-Member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/Estate <input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> Government Agency <input type="checkbox"/> Limited Liability Company* If you checked Limited Liability Company you MUST enter tax classification (C=C Corporation, S=S Corporation, P=Partnership) _____		
EXEMPTIONS <small>Codes apply only to certain entities, not individuals FATCA applies to accounts maintained outside the US</small>	Exempt Payee Code (if any)	Exempt from FATCA reporting code (if any)
	Address to send PURCHASE ORDER:	Address to send INVOICE PAYMENTS:
Street Address		
PO Box		
City		
State, Zip		
Contact Name		
Website		
Contact E-mail Address		
Contact Phone Number	()	()
Where will work be performed?	Supplier location _____	Vermont _____ Other _____
Would you be willing to accept payment via credit card (VISA)? (Please circle) YES or NO		
Business Classification: (Please circle) LARGE or SMALL or MINORITY If Small Business, please circle if 51% or more of your company is owned by: WOMEN or VETERAN or DISADVANTAGED		
University of Vermont's payment terms are Net 30		

Certification: Under penalties of perjury, I certify that: (1) The number shown above 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; (3) I am a U.S. person (including a U.S. resident alien); (4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

SIGNATURE	DATE
Name	Title

FEDERAL LAW REQUIRES THAT YOU PROVIDE US WITH AN ACCURATE REPLY
The IRS may impose a penalty of up to \$500 for non-compliance or for supplying false information.