



Mail or Fax to: Purchasing
 MSN 3C5, Fax: 703-993-2589;
 Tel: 703-993-2580

Request for Taxpayer Identification Number(s) and Certification (Substitute Form W-9)

(Completed Form Must be on File at George Mason University for Payment Processing)

Legal Name _____
 (Must Match the Social Security Number, if Applicable)

Trade Name _____
 (Must Match the Employer Identification Number, if Applicable)

Remit to Address _____

 City State Zip + 4 Country

Contact Name _____ Business Phone (_____) _____ - _____

DUNS #: _____ Fax: (_____) _____ - _____ Email: _____

Organization Entity and Tax Identification Number (TIN) - The number provided in this section will be used to report payments to the IRS, if applicable.

Organization Entity: Tax Identification Number (must complete):
 Check Only One: Social Security No: Employer Identification No:

Individual _____

Nonresident Alien * _____
 (See Below)

Sole Proprietor _____ and _____

Partnership _____

Corporation _____

Sub Chapter S Corporation _____

Medical Corporation _____

Federal or State of Virginia/ Governmental Entity _____

Local or Other State Governmental Entity _____

Trust or Estate _____

Nonprofit Organization ** (See Below) _____

George Mason University Employee _____

Business Classification
 Please check one:

- Small Business
- Women Owned Business
- Minority Owned Business

If minority owned, please check one.

- African American
- Asian American
- Hispanic American
- Native American
- Eskimos & Aleuts

See back of form for definitions.

DMBE # _____

eVA Vendor Yes No

*If you are a Nonresident Alien, use the appropriate Form W-8 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

** ONLY IF organization (association, club, religious, charitable, education or other group) is tax exempt under IRS Code Section 501(a). Note : This includes organizations exempt under IRS Code Section 501(c)(3).

Certification : Under Penalties of Perjury, I Certify That:

- (1) The number(s) shown on this form is (are) the correct taxpayer number(s) (or I am waiting for a number to be issued to me), and
- (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the Internal Revenue Service has notified me that I am no longer subject to backup withholding, and
- (3) I am a U.S. person (including a U.S. resident alien)

Certification Instructions: You must cross out item (2) above if you have been notified by IRS that you are currently subject to backup withholding because of under reporting interest or dividends on your tax return.

Signature of Person Authorized to Sign This Application _____

Print Name and Title of Authorized Signor _____

Date _____