

## IRS Form W-9

The IRS Form W-9 Request for Taxpayer Identification Number and Certification must have all applicable sections of the document completed by the potential State of Ohio supplier, including supplier name, taxpayer type, address, a valid tax identification number, and handwritten signatures. Supplier Operations forms are available through the [Ohio Shared Services](#) website.

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|---|--|--|
| Form<br><b>W-9</b><br>(Rev. January 2011)<br>Department of the Treasury<br>Internal Revenue Service | <b>Request for Taxpayer<br/>         Identification Number and Certification</b>   | <b>Give Form to the<br/>         requester. Do not<br/>         send to the IRS.</b> |
| Print or type<br>See Specific<br>instructions on page 2.  | Name (as shown on your income tax return)  |  |
|   | Business name/disregarded entity name, if different from above   |  |
|   | Check appropriate box for federal tax<br>classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate |  |
|   | <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)   |  |
|   | <input type="checkbox"/> Other (see instructions)  |  |
| Address (number, street, and apt. or suite no.)   |  | Requester's name and address (optional)  |
| City, state, and ZIP code   |  |  |
| List account number(s) here (optional)  |  |  |

**Name** must be completed unless listed on the Business Name line. Must match name(s) listed on Supplier Information Form. Will be entered or updated (if applicable) on Identifying Information Tab in the Supplier Module.

- A stamped name is acceptable.

**Business Name** may or may not be completed. It must match name(s) listed on Supplier Information Form. If provided, will be entered or updated (if applicable) on the Identifying Information Tab in the Supplier Module.

**Type of Entity** (Check appropriate box for federal tax) must be marked. Will be entered or updated on the Identifying Information Tab in the Supplier Module.

- Business entity type must be provided unless it is an individual using their Social Security Number.
- When the entity type "Other" is marked, then the entity type must be specified (e.g., Non-profit, 501C3, government entity, association, etc.).

**Address Information** must be a complete address (building, number and street, city, state, zip). This may or may not match the Supplier Information Form. If a new supplier record is being created then we will enter this address on the Address Tab in the Supplier module in addition to the addresses from the Supplier Information Form in Section 3 or 4. If an address is on the W9 and/or W8 that is not on the Supplier Information Form, add the address to the supplier record as an additional address.

- A stamped address is acceptable.

Disregard any information in:

- Exemptions
- Requester's name and address
- List account number(s) here

### Part I Section - TIN

|               |   |  |  |
|---------------|---|--|--|
| <b>Part I</b> | <b>Taxpayer Identification Number (TIN)</b> |  |  |
|---------------|---|--|--|

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

|                                |  |  |  |  |   |  |  |  |  |
|--------------------------------|--|--|--|--|---|--|--|--|--|
| social security number         |  |  |  |  |   |  |  |  |  |
|                                |  |  |  |  | - |  |  |  |  |
| Employer identification number |  |  |  |  |   |  |  |  |  |
|                                |  |  |  |  |   |  |  |  |  |

**Part I Taxpayer Identification Number (TIN)** must be completed. The TIN must be 9 digits for both a Social Security Number (SSN) and Employer Identification Number (EIN). Both numbers may be provided but one must match the information provided on the Supplier Information Form and match the supplier record (if applicable). This number will be entered on the **Identifying Information** tab in the Supplier module.

- A **Social security number** (SSN) may be provided for an individual, sole proprietor, or trustee.
- An **Employer identification number** (EIN) must be provided for a corporation, partnership, nonprofit, trustee / estate, association, limited liability, or government entity.

## Part II Section - Certification

### Part II 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), and
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 that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

**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. For real estate transactions, item 2 does not apply. For mortgage interest paid, 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 on page 4.

|                  |                            |        |
|------------------|----------------------------|--------|
| <b>Sign Here</b> | Signature of U.S. person ▶ | Date ▶ |
|                  |                            |        |

1. This signature section must be handwritten.
  - **Electronic and stamped signatures are not accepted at this time.**
  - Do not accept signature if you can click on the signature and move it around the page.
  - Do not accept signature if there are black lines around it indicating use of a rubber stamp.
  - Do not accept Font signatures.
2. May or may not match the signature on the Supplier Information Form.
3. Date is not a required field.

To see a full page image of the W-9, click [here](#).