

**THE CITADEL Vendor Information Form  
Substitute W-9 (Taxpayer Identification Form)**

Federal law requires The Citadel to collect taxpayer information for each entity to whom the College makes a payment. This information is necessary to create a vendor ID in the College's ERP system and no payments can be released until this information is obtained. Completed forms must be submitted as an attachment to an email in **ENCRYPTED** format to ensure data protection.

**Return completed form to:** [vendor\\_maintenance@citadel.edu](mailto:vendor_maintenance@citadel.edu)

**NAME & ADDRESS (as shown on tax return)**

Individual/Company Name \_\_\_\_\_  
 DBA (if different) \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_

**TAX INFORMATION**

**TIN or SSN** \_\_\_\_\_

US Individual	_____	US Partnership	_____
US Sole Proprietor or Single Member LLC	_____	Tax Exempt Organization	_____
US C Corporation	_____	Limited Liability Company (LLC)	_____
US S Corporation	_____	(If LLC, note Corp, S-Corp, or Partnership)	_____

Are payments 1099 reportable? Yes \_\_\_\_\_ No \_\_\_\_\_

FATCA reporting exemption code (if any) \_\_\_\_\_ (Applies to accounts maintained outside the U.S.)

Minority Owned Yes \_\_\_\_\_ No \_\_\_\_\_ Veteran Owned Yes \_\_\_\_\_ No \_\_\_\_\_

Classification \_\_\_\_\_ (African American, Hispanic, Native American, Asian, Woman, Small Business)

SC Certified MBE? Yes \_\_\_\_\_ Cert. # \_\_\_\_\_  
 No \_\_\_\_\_

**The Citadel's payment terms are Net 30**

**CONTACT INFORMATION**

Order Address		Remit to Address (if different)	
Address Line 1	_____	Address Line 1	_____
Address Line 2	_____	Address Line 2	_____
City, State, Zip	_____	City, State, Zip	_____
Country	_____	Country	_____
Telephone	_____	Telephone	_____
Contact Name	_____	Contact Name	_____
Email Address	_____	Email Address	_____

**CERTIFICATION (Form MUST be signed to be accepted)**

Under penalties of perjury, I certify that: (1) The number above is my correct taxpayer identification number; and (2) I am not subject to backup withholding because (a) I am exempt, or (b) I have not been notified by the 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 US citizen; and (4) The FATCA code(s) entered on this form (if any) indicating exemption from FATCA reporting is correct; and (5) The information contained on this form is complete and accurate as of the submission date.

Signature \_\_\_\_\_  
 Printed Name \_\_\_\_\_  
 Requesting Dept/ Individual \_\_\_\_\_

Date \_\_\_\_\_