



# Substitute Request for Taxpayer Identification Number and Certification

# W-9

Substitute Form  
(Rev. 04APR19)

▶ Email completed form to: [vendor.requests@pcc.edu](mailto:vendor.requests@pcc.edu)

**Name** (as shown on your income tax return). Name is required on this line; do not leave this line blank:

**Business name**/disregarded entity name, if different from above:

Check appropriate box for **federal tax classification**; check only **one** of the following seven boxes:

- Individual/sole proprietor or single-member LLC
- C Corporation       S Corporation       Partnership       Trust/estate
- Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ \_\_\_\_\_

**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (specify)▶ \_\_\_\_\_

**Exemptions** (codes apply only to certain entities, not individuals):

Exempt payee only (if any) \_\_\_\_\_ Exemption from FATCA reporting code (if any) \_\_\_\_\_

**Address** (number, street, and apt. or suite no.): \_\_\_\_\_ City, State, and ZIP code: \_\_\_\_\_

### Tax Identification Number (TIN)

The TIN provided must match the name given on "Name" line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). For entities, it is your employer identification number (EIN).

Social security number      -      -      Or Employer identification number      -

SEND CONTRACTS/PURCHASE ORDERS TO	SEND/REMIT PAYMENT TO
Sales contact person:	Accounts Receivable contact person:
Address (number, street, and apt. or suite no.):	Address (number, street, and apt. or suite no.):
City, state, and ZIP code:	City, state, and ZIP code:
Phone:	Phone:
Email (Contracts/Purchase Orders will be emailed):	Email:

Website URL: \_\_\_\_\_

Have you previously done business with Portland Community College: \_\_\_Yes \_\_\_No \_\_\_Unknown

Have you previously been or are you currently an employee of Portland Community College: \_\_\_Yes \_\_\_No

If Yes, enter employment end date or "current": \_\_\_\_\_

## Certifications

Please indicate Inclusion and Diversity certifications:

### U.S. Small Business Administration

- 8A
- Disadvantage Business Enterprise
- Hub Zone
- Minority Owned
- Service Disable Veteran Owned
- Veteran Owned
- Women Owned

### Oregon COBID

- Disadvantaged Business Enterprise (DBE)
- Emerging Small Business (ESB)
- Minority Business Enterprise (MBE)
- Service Disabled Veteran Business Enterprise (SDVBE)
- Women Business Enterprise (WBE)

Other Certification: \_\_\_\_\_

Cert Number or ID: \_\_\_\_\_

Cert Expiration Date: \_\_\_\_\_

Under penalty of perjury, I certify that:

- a. 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
- b. I am not subject to backup withholding because: (i) I am exempt from backup withholding, or (ii) 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 (iii) the IRS has notified me that I am no longer subject to backup withholding; and
- c. I am a U.S. citizen or other U.S. person who is legally allowed to work in the U.S.; and
- d. I am authorized to conduct business within the State of Oregon; and
- e. The FATCA codes(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions: You must cross out item b. 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, "Business name" 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.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature of U.S. Person ► \_\_\_\_\_ Date: \_\_\_\_\_