State of South Dakota
Department of Executive Management
BFM-0001 (08/2005)

Substitute **W-9**

SD School of Mines and Technology
Office of Business Services
501 East Saint Joseph Street
Rapid City, SD 57701-3995
Send faxes to: 605-394-6131

DO NOT send to IRS

Taxpayer Identification Number (TIN) Verification

Print or Type
Please see attachment or reverse for complete instructions.

Legal Name
(as entered with IRS) **If Sole Proprietorship enter your Last, First MI**

Trade Name
If doing business as (DBA) or enter business name of Sole Proprietorship

Order Address (where orders should be mailed)
PO Box or Number and Street, City, State, ZIP + 4

Remit Address (where checks should be mailed, if different from Order address) PO Box or number and street, City, State, ZIP + 4

Entity Designation (check only one)
Required

- ☐ Individual / Sole Proprietor
- ☐ Corporation (includes service corporations)
- ☐ Limited Liability Company - Partnership
- ☐ Limited Liability Company - Corporation
- ☐ Government Entity
- ☐ Hospital Exempt from Tax or Government Owned
- ☐ Long Term Care Facility Exempt from Tax or Government Owned
- ☐ All Other Entities

Taxpayer Identification Number (TIN)
If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, using your EIN may result in unnecessary notices to the requester.

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Business Classification – This section is voluntary and information provided is confidential. Check all that are applicable.

- ☐ Small Business
- ☐ HUBZone Small Business
- ☐ Veteran Owned Small Bus.
- ☐ Service Disabled Veteran Owned Small Business
- ☐ Woman Owned Business
- ☐ Disadvantage Business
- ☐ Minority Institution
- ☐ Minority-Owned Business

Check Only One ***Required***

- ☐ Social Security Number (SSN)
- ☐ Employer Identification Number (EIN)
- ☐ Individual Taxpayer Identification Number for U.S. Resident Aliens (ITIN)

Certification
Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number, AND
2. I am not subject to back up 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 back up 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.
3. I am a U.S. person (including a US resident alien).

Printed Name	Printed Title	Telephone Number / Facsimile Number ( ) ( )
Signature		Date (mm/dd/ccyy)

Optional Direct Deposit Information

Your Bank Account Number	☐ checking ☐ savings	Name on Bank Account	Bank Routing No. (9-digit ABA #)

THIS IS A:
☐ new direct deposit ☐ change of existing ☐ additional direct deposit ☐ email change only

E-mail address (Please make this LEGIBLE) **Website:**

If you provide an email address you will be sent electronic notification when a payment is issued. You will also receive a PIN for use when logging into the SD Vendor Self Service website at http://www.state.sd.us/bfm/vendor. We will **NOT** share your email address with anyone or use it for any other purpose than communicating information about your payments to you.