PLEASE TYPE OR PRINT LEGIBLY

Kilgore Independent School District
Substitute Form W-9: Request for Taxpayer Identification Number And Additional Contact Information

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:

☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/Estate

☐ Limited liability company. Enter the tax classification. (C=C corporation, S=S corporation, P=partnership) _____

☐ Other _____

Exemptions:

Exempt payee code (if any) _____

Address (number, street, & apt. or suite number)

City, state, & ZIP code | Primary Phone | Primary e-mail

TAXPAYER IDENTIFICATION NUMBER

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). For guidance, please see the General Instructions section of IRS Form W-9, available at http://www.irs.gov/w9.

Social Security Number

☐☐☐ - ☐☐ - ☐☐☐☐

***OR* Employer Identification Number**

☐☐ - ☐☐☐☐☐☐☐

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 not longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined in the General Instructions).

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 IRA, and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

Sign Here — **Signature of U.S. person** ⇨ **Date** ⇨

ADDITIONAL INFORMATION

Remittance Address (if different)

Number, street, & apt. or suite number

City, state, & ZIP code

Billing Phone Number | Billing e-mail

Order-From Address (if different)

Number, street, & apt. or suite number

City, state, & ZIP code

Sales/Order Contact Name | Sales Phone Number | Sales e-mail

Cooperative Purchasing Information

*Please mark any purchasing cooperative(s) with which your company **currently** holds an award or contract.*

☐ Region VII Purchasing Co-op ☐ Buyboard

☐ TCPN ☐ U. S. Communities

☐ TIPS/TAPS ☐ State of Texas (TX-MAS, DIR, etc.)

☐ Other _____

Sole Source Distributor

*Is your company the sole distributor of all or some of the products sold? **If yes, you must also complete a** Notarized Sole Source Declaration form.*

☐ Yes– all products

☐ Yes– certain products

☐ No

Return to: Kilgore ISD, Attn: Purchasing, 301 N. Kilgore St., Kilgore, TX 75662, Fax to (903) 983-3212, or e-mail: purchasing@kisd.org