



VENDOR SETUP FORM

In order to comply with the Internal Revenue Service (IRS) form 1099 reporting rules, we are required to request the following information. To avoid unnecessary receipt of form 1099, please complete and return to us the information listed below.

If you fail to provide your taxpayer identification number, the Tangipahoa Parish School System is required by law to withhold 20% (percent) of your payment as backup withholding payable to the IRS. **Please complete the attached W-9 form. Return all forms to tangivendors@tangischools.org.**

Section 1

COMPANY INFORMATION			
COMPANY NAME		SOCIAL SECURITY NO	FEDERAL EMPLOYER ID NO
PHYSICAL ADDRESS		CITY, STATE, ZIP	
MAILING ADDRESS		CITY, STATE, ZIP	
TELEPHONE NO ()	FAX NO ()	EMAIL ADDRESS (Where purchase orders should be sent)	
PLEASE CHECK THE BOX BELOW THAT BEST DESCRIBES THE TYPE OF TRANSACTION FOR WHICH WE MAKE PAYMENTS TO YOU. (CHECK ALL THAT APPLY)			
☐ MERCHANDISE ☐ RENTS ☐ SERVICES ☐ PROFESSIONAL FEES ☐ OTHER (Describe)			
Have you, or someone who owns 25% or more of your business been employed by the Tangipahoa Parish School System in the last two years?		Are you an immediate family member to any person employed by the Tangipahoa Parish School System or member of the School Board?	
☐ YES ☐ NO (If YES, continue to Section 2.)		☐ YES ☐ NO (If YES, continue to Section 2.)	
*If company will be providing a service on TPSS property, please attach a current certificate of workers compensation insurance. This COI must be resubmitted upon renewal of your policy each year.			
ARE YOU INCORPORATED?	ARE YOU FEDERALLY TAX EXEMPT?	Are you providing Telecommunications or Video Surveillance Equipment or Services? (If yes, complete Telecom/Video Surveillance Equipment Vendor Affidavit)	
☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	

Section 2

The following information is necessary to process your vendor account with the Tangipahoa Parish School System regarding compliance with State Ethics Law.

The Louisiana Code of Governmental Ethics prohibits public servants from bidding on or entering into any contract, subcontract or other transaction under the supervision or jurisdiction of the public servant's agency. This restriction also applies to the immediate family members of the public servant and to legal entities in which the public servant and/or his/her family members own an interest in excess of 25%.

As used above, the term "public servant" means a public employee or an elected official.

As used above, the term "agency" means a department, office, division, agency, commission, board, committee, or other organizational unit of the Tangipahoa Parish School System.

As used above, the term "immediate family member" refers to children, spouses of children, brothers, sisters, spouses of brothers and sisters, parents, spouse, and the parents of his/her spouse.

NAME OF EMPLOYEE OR BOARD MEMBER	DEPARTMENT/SCHOOL WHERE SYSTEM EMPLOYEE WORKS	JOB TITLE OF SYSTEM EMPLOYEE
Does an immediate family member employed by the School System or Board Member own an interest of the vendor in excess of 25%?		☐ YES ☐ NO
Does an immediate family member employed by the School System or Board Member have authority over hiring this vendor, the funds that will pay this vendor, or determining which goods or services will be provided by this vendor?		☐ YES ☐ NO

I certify that the above information is true and correct. I understand that if Louisiana Code of Governmental Ethics is violated, TPSS will not be responsible for payment of vendor invoices.

Signature _____ Printed Name _____ Date _____

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor or single-member LLC ☐ 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 (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

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); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
-----------	----------------------------	--------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



59656 Puleston Road
 Amite, LA 70422
 Telephone: 985-758-7153
 www.tangischools.org

ACCOUNTS RECEIVABLE INFORMATION

VENDOR INFORMATION		
COMPANY NAME		SSN NO. OR TAXPAYER ID NO.
REMITTANCE MAILING ADDRESS		
CITY, STATE, ZIP		
PHYSICAL ADDRESS IF DIFFERENT		
ACCOUNTS RECEIVABLE CONTACT	ACCOUNTS RECEIVABLE CONTACT EMAIL	ACCOUNTS RECEIVABLE TELEPHONE NUMBER ()
PAYMENT PREFERENCE ☐ CHECK (If selected, continue to next page) ☐ EFT (If selected, complete next section)		

EFT PAYMENT INFORMATION

FINANCIAL INSTITUTION INFORMATION		
BANK NAME		
PHYSICAL ADDRESS		
CITY, STATE, ZIP		
TYPE OF ACCOUNT ☐ CHECKING ☐ SAVINGS	REMITTANCE EMAIL ADDRESS	
NINE-DIGIT ROUTING TRANSIT NUMBER	ACCOUNT NUMBER	
SIGNATURE OF AUTHORIZED OFFICIAL	TITLE	TELEPHONE NUMBER ()

OFFICE USE ONLY:	VID: _____
Entered by: _____	Reviewed by: _____
Date: _____	Date: _____