Department of Transformation and Shared Services
Governor Sarah Huckabee Sanders
Secretary Joseph K Wood

PURCHASING VENDOR MAINTENANCE REQUEST FORM

Use this form to request vendor maintenance for vendors that can be issued a contract or purchase order.

Maintenance Type

Choose one of the three maintenance types listed below. Enter the vendor number if a change or deletion is needed.

- ○ **Create a new vendor record.**
- ○ **Specify the vendor number for the account you want changed.** _____
- ○ **Specify the vendor number for the account you want deleted.** _____

Account Group

○	**Standard Goods / Service**	VEND	• General providers of goods and services. • Nine-digit account number that begins with a one.
○	**Not for Profit**	NTFP	• Not for profit vendors as designated by IRS 501 (c) 3 letter or publication 78. • Nine-digit account number that begins with a six.
○	**Agency**	AGCY	• Arkansas state agencies and institutions of higher education. • Examples include Henderson State University and the Arkansas Department of Transportation. • Ten-digit account number that begins with 99, and the third through sixth digit of the account number will be the agency's business area number.
○	**Arkansas City / County**	LGVT	• Arkansas cities and counties. • Examples include city and county utility, fire, and police departments. • Nine-digit account number that begins with an eight.
○	**Arkansas Government (Not City / County**	OGVT	• Government entities that are at least partially funded by the State of Arkansas, not including city or county offices. • Examples include Omaha Arkansas Volunteer Fire Department and Northeast Arkansas Waste Water Association. • Seven-digit account number that begins with a four.
○	**Federal / Another State's Agency or Institution of Higher Education**	GOVT	• Government entities from other states or federal agencies. • Examples include Washington State Patrol and the United States Department of Agriculture. • Nine-digit account number that begins with a five.
○	**Foreign**	FRGN	• Vendors outside the United States. • Examples include vendors located in Canada and United States territories. • These vendors complete a W-8BEN instead of a W-9. • Nine-digit account number that begins with a seven.
○	**Public School**	PFSC	• Arkansas public school districts, education co-ops, state charter schools. • Nine-digit account number that begins with a 3, and the second through eighth digit is a local education agency (LEA) number from the Department of Education.

Office of State Procurement
501 Woodlane St, Ste 220 * Little Rock, Arkansas 72201 *
501.324.9316

Tax Information

Enter the vendor's federal Employer Identification Number (EIN) if the vendor needs one per the IRS. If the vendor does not need one per the IRS, enter their Social Security Number (SSN).

EIN

SSN

Vendor Address Information

The vendor must provide a street address and/or PO box address for payment, shipping, and handling.

- If this is a request for a new record, enter the information in the New column.
- For a changed record, enter the prior information in the Previous column and new information in the New column.
- For a deletion, enter the information in the Previous column.

Each of the name fields has a 40-character limit. The street fields have a 60-character limit.

Previous (if requesting a change or deletion)

Vendor's Name (Line 1 of W-9)

Vendor's Name Continued

DBA Name (Line 2 of W-9)

DBA Name Continued

Street Address Line 1

Street Address Line 2 (e.g. Building Name)

City

State **Street Address Zip Code**

PO Box **PO Box Zip Code**

New

Vendor's Name (Line 1 of W-9)

Vendor's Name Continued

DBA Name (Line 2 of W-9)

DBA Name Continued

Street Address Line 1

Street Address 2 (e.g. Building Name)

City

State **Street Address Zip Code**

PO Box **PO Box Zip Code**

Vendor Contact Information

Salesperson

Telephone Number **Fax Number**

Email Address

Payment Type

Verify the payment type that you want to use. Direct deposit payments require additional documentation from the vendor.

- ○ **Check or Warrant**
- ○ **Direct Deposit**

Direct Deposit Information

For the option to pay via direct deposit, submit a voided check or bank letter with the following information:

- Account holder's name
- Account number
- Routing number
- Bank official's signature
- Bank official's contact information

Direct Deposit Maintenance Type ○ **Add** ○ **Change** ○ **Cancel**

Bank Name _____

Bank Routing # _____ **Bank Account #** _____

Account Holder _____

Account Type ○ **Checking** ○ **Savings**

1099 Reportable

See the 1099 Guidelines and Instructions provided by the DFA Office of Accounting.

Exemption Code: Select Option

AASIS Partner Information

Leave these fields blank if you do not have Partner Information. If you use another vendor record for the vendor's address, check Physical Address or Payment Address and provide the vendor number**.**

○ **Physical Address** ○ **Payment Address** **Partner Vendor Number** _____

Minority Certification

The Arkansas Economic Development Commission (AEDC), Minority and Women-Owned Business Enterprise (MWBE) division will designate vendors as minority, women-owned, or service-disabled veteran-owned minority business enterprises. If you have questions about this designation or need a designation added/updated, contact the MWBE division of AEDC at VendorMaintenance@ArkansasEDC.com.

Agency Contact Information

Requester's Name _____

Email _____

Telephone # _____ **Fax #** _____

Agency Name _____ **Purchasing Org. #** _____

Agency Address _____

City _____ **State** _____ **Zip Code** _____

Requests for vendor maintenance should be emailed from the Agency Reviewing Official to AASIS-OSP@Arkansas.gov. If the agency has a hard copy of the W-9, scan it and email it as an attachment with this form.

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

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

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
- ◯ C Corporation
- ◯ S Corporation
- ◯ Partnership
- ◯ Trust/estate
- ◯ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▸
- ◯ Other (see instructions) ▸

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.

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)

(Applies to accounts maintained outside the U.S.)

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.*

Print Form

Email Form