



INDIANA UNIVERSITY

OFFICE OF THE VICE PRESIDENT
AND CHIEF FINANCIAL OFFICER

Department of Business Diversity

Business Diversity Certification Form

For an explanation of all the diversity classifications listed below please visit our website at <http://www.indiana.edu/~busdiv/certification.shtml>. If any of the Business Classifications selected below are classified as **certified** you must include the certifications when returning this form.

Company Information

| | |
|--|--|
| Company Name: | IATDP |
| Address: | 2808 Red Ellis Lane Knoxville TN 37924 |
| Phone: | (865) 455-8915 |
| Fax: | (865) 594-1504 |
| Contact Name: | Brian Hartsell |
| Email: | brian.hartsell@KnoxSchools.org |
| List products or services this company provides: | |
| List UNSPSC codes (if known): | |

Diversity Classifications

| | |
|--|---|
| Is the owner or owners of this business a US citizen(s)? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Is this a non-profit (501) (c) organization? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is this business certified as a qualified HubZone small business by the Small Business Administration? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is this business a certified Minority Business Enterprise (MBE)? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| If an MBE, please check all the minority classifications that apply below | |
| <input type="checkbox"/> African-American | <input type="checkbox"/> Asian-American |
| <input type="checkbox"/> Hispanic-American | <input type="checkbox"/> Native-American |
| <input type="checkbox"/> Asian Pacific-American | <input type="checkbox"/> Other (please specify: _____) |
| Is this a certified Women Business Enterprise (WBE)? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is this a Veteran-owned small business (VOSB) or Service-Disabled-Veteran-owned Small Business (SDVOSB)? Send DD214 or a military ID | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is this business a Small Business as defined by the SBA? (See Small Business classification definition at www.indiana.edu/~busdiv) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Is this business certified as an 8(a) by the SBA? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

| | |
|-------------|----------------------------|
| Signature: | <i>Brian Hartsell</i> |
| Name/Title: | Brian Hartsell / Treasurer |
| Date: | Sept. 21, 2017 |



INDIANA UNIVERSITY
PURCHASING DEPARTMENT

Vendor Information

Please provide as much information as possible to help facilitate a more productive working relationship with Indiana University.

Purchase Order Delivery Methods

| | |
|--|--|
| Vendor Name IATDP | E-mail Address brn.hartsell@knoxschools.org |
| Street Address or P.O. Box 2808 Red Ellis Lane | City, State, Zip Knoxville, TN 37924 |
| Facsimile Number (865) - 594 - 1504 | If there are multiple fax numbers to which purchase orders should be sent (i.e. for different departments/product categories), please attach a list of numbers and corresponding departments on a separate page. |

Remit-to Address
 Check here if same as above

| | |
|----------------------------|------------------|
| Street Address or P.O. Box | City, State, Zip |
|----------------------------|------------------|

Contact Information

| | |
|--|--|
| Sales Contact | Accounts Receivable Contact |
| Telephone Number (with extension if applicable) () - X | Telephone Number (with extension if applicable) () - X |
| E-mail Address | E-mail Address |

URL / E-mail Information

| | |
|------------------------------------|--|
| Primary URL (i.e. www.indiana.edu) | E-Mail Address for General Inquiries (i.e. info@indiana.edu) |
|------------------------------------|--|

Payment Information

| | | |
|--|--|--|
| Minimum Order Requirements | DUNS Number - provided by Dun & Bradstreet (if applicable) | Do you accept Visa? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Payment Terms: <i>Please note: Indiana University's preference for payment terms is net 30 because this is the shortest period in which we can consistently ensure payment. The University makes every effort to uphold to our commitment to pay our vendors in a timely manner. If you have questions or concerns contact the Purchasing Department at 812-856-3057.</i> | Shipping Terms 1 - who retains ownership during shipment? <input type="checkbox"/> FOB Origin (IU) <input type="checkbox"/> FOB Destination (vendor) <input type="checkbox"/> FOB Shipping Point (Distributor) <input type="checkbox"/> Customs - US Port <input type="checkbox"/> Customs International Port | Shipping Terms 2 - who is responsible for shipping fees? <input type="checkbox"/> IU - Prepaid and Added to invoice <input type="checkbox"/> IU - Separate bill <input type="checkbox"/> Vendor - "Allowed" <input type="checkbox"/> Paid by third party |

Please provide at least one United Nations Standard Products and Services Code® (UNSPSC®) commodity code that best describes the goods or services you supply. The list of valid UNSPSC® codes is available here: <https://www.unspsc.org/search-code>



INDIANA UNIVERSITY

OFFICE OF FINANCIAL MANAGEMENT SERVICES

IRS Substitute Form
W-9

**Request For Taxpayer Identification Number and
Certification**
(For Use By U.S. Citizens, U.S. Entities, Or Resident Aliens Only)

Return form to the
requesting IU department

Under the United States Internal Revenue Code, Indiana University is required to obtain Taxpayer Identification Numbers (TIN) when making reportable payments to individuals or entities. Certain payments may be subject to a backup withholding rate of twenty-eight percent when this information is not provided. The IRS may also assess a penalty of \$50 per form unless failure to comply is due to reasonable cause and not willful neglect.

Print or Type
See specific instructions on Form W-9 Instructions

Legal name (as shown on your income tax return and matches TIN number listed in Part I)
IATDP

Business name (only use when "doing business as" (dba) is a different name than the legal name listed above)

Check appropriate box for federal tax classification

| | | |
|---|--|---|
| <input type="checkbox"/> Individual (SSN) | <input type="checkbox"/> Single Member LLC (SSN/EIN) Name = Individual | <input type="checkbox"/> Estate/Trust (EIN) |
| <input type="checkbox"/> Sole Proprietor (SSN/EIN) | <input type="checkbox"/> LLC (EIN) Enter Tax Classification Code _____ | <input checked="" type="checkbox"/> Non-Profit Organization (EIN) |
| <input type="checkbox"/> C Corporation (EIN) | (C = C Corporation, S = S Corporation, P = Partnership) | <input type="checkbox"/> Governmental (EIN) |
| <input checked="" type="checkbox"/> S Corporation (EIN) | <input type="checkbox"/> Partnership (EIN) | <input type="checkbox"/> Other _____ |

Check the box below if you perform health care or legal services

Health Care Services Legal Services

Exemptions (see Form W-9 Instructions) Exempt Payee Code _____
Exemption from FATCA Reporting code (if any) _____

Address (number, street, and apt. or suite no.)
2808 Red Ellis Lane 1

| | | |
|--------------------------|--------------------|--------------------------|
| City Knoxville | State TN | Zip Code 37924 |
|--------------------------|--------------------|--------------------------|

Part I Taxpayer Identification Number (as reported for tax purposes and matches legal name above)

Social Security Number/ITIN
(Legal name above must be individual name) _____

*** OR (only one) ***

Employer Tax ID Number **20-5814 527**

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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

| | | |
|------------------|---|------------------------|
| Sign Here | Signature of U.S. person Brian Hartseep | Date 9-21-17 |
|------------------|---|------------------------|



INDIANA UNIVERSITY

PURCHASING DEPARTMENT

Dear Sir or Madam:

Indiana University would like to place an order with you or your organization. To process that order, you or the entity you represent must be added to our vendor system. Our four-page Vendor Information Packet (VIP) follows this page and completion of the VIP will allow us to establish you or your organization as a vendor in our system.

VIP Summary:

- PAGE 1: W-9 (required)** – The W-9 must include your legal name and tax ID (as used when filing US federal income taxes), address, and ownership type. **It must be signed.**
- PAGE 2: Vendor Information (required)** – This page contains information that will help facilitate a more productive working relationship with Indiana University. We ask that you please provide as much information as possible.
- PAGE 3: ACH Agreement (optional)** – We encourage you or your organization to take advantage of direct deposit, as it saves time and resources when processing payments.
- PAGE 4: Business Diversity Certification Form (optional)** – Please complete this form if your business is a small business, minority- or woman-owned business, or meets other criteria listed at <http://www.indiana.edu/~busdiv/classification.html>.

For your convenience and for legibility, the attached forms may be completed in Adobe Acrobat. All fields with red borders – and the tax ID on the W-9 – are required. **Email is not a secure method of transmission**, so please do not return these forms via email if you are including either a social security number or banking information. Return completed forms via fax or mail if you are including any sensitive data.

Please return these forms to the Indiana University employee who sent them to you. Include that person's name on your cover page. If you return these forms to the Purchasing Department without any information as to who requested them from you, the approval of you or your organization (and therefore processing of the order and payment) will be delayed.

If you have any questions about these forms, please contact the Vendor Workgroup at the Indiana University Purchasing Department at 812-856-3057 or 812-856-1767. **For more information on doing business with Indiana University, including our invoice requirements, please visit <http://www.indiana.edu/~purchase/partnerships/partnerships.shtml>.**

Sincerely,

The Vendor Workgroup
Indiana University – Purchasing Department
Fax: 812-855-7839

Request for Taxpayer Identification Number and Certification

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

| | | |
|---|---|---|
| Print or type See Specific Instructions on page 2. | Name (as shown on your income tax return) International Association for Truancy and Dropout Prevention | |
| | Business name/disregarded entity name, if different from above IATDP | |
| | Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input checked="" type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____ | |
| | Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ | |
| | Address (number, street, and apt. or suite no.) 2808 Red Ellis City, state, and ZIP code Knoxville, TN 37924 | Requester's name and address (optional) |
| 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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

| | |
|---|--|
| Social security number | |
| [] [] [] - [] [] - [] [] [] [] | |
| Employer identification number | |
| 2 0 - 5 8 1 4 5 2 7 | |

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below), and
- 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 on page 3.

| | | |
|------------------|--------------------------|-----------------------|
| Sign Here | Signature of U.S. person | Date ▶ 7-14-17 |
|------------------|--------------------------|-----------------------|

General Instructions

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

