

## Avalara SST Application

This application identifies the specific information required for Avalara to complete your SST registration process and generate your tax profile. Use this form if you anticipate using Avalara as your Certified Service Provider (CSP). All fields must be completed for this application to be reviewed and accepted.

### SST Pre-registration Requirements

You must...

- Complete the SST registration form
- Complete your company's AvaTax integration with your assigned GoLive manager
- Map item codes to SST certified Avalara tax codes

### SST Post-registration Requirements

You must...

- Use AvaTax to calculate tax on all sales
- Send an invoice item description for each item sold
- Send street-level addresses for all sales (for the most accurate tax calculation)
- Supply exemption certificate information to AvaTax prior to processing exempt transactions

### Filing Requirements

As your CSP, Avalara is contractually required to file your SST returns **monthly** starting on your SST GoLive date. Once you integrate with AvaTax, your GoLive manager confirms your SST GoLive date. If you already registered and file on a quarterly, semi-annual, or annual basis, **you must** contact the SST state for the best practice for remitting taxes collected prior to joining the SST program. Past transactions are not pulled forward into SST filed remittances. Contact your Account Manager if you need assistance with past transactions.

### SST Audits

In states where you have a "volunteer" SST status, Avalara acts as a liaison between you and the state during sales tax audits. If you are an SST non-volunteer seller, the state contacts you directly for all sales tax audits.

### Payment and Fees

Returns filed in states where you have a "volunteer" SST status are free of charge. SST states pay Avalara based on the amount of tax filed by volunteer sellers, per their agreement with all CSPs. Returns filed where you have an SST status of non-volunteer carry a charge. If Avalara files returns for you in SST and non-SST states, then the price per SST non-volunteer return is your standard returns rate. If you are filing only in SST states, then the fee is \$55 per return, per month.

### SST Volunteer Status and Economic Nexus

"Economic nexus" is a term that refers to the requirement to collect and pay sales tax on income derived in that state even though the business may lack a physical presence. Economic Nexus **does not** preclude you from having an SST status of volunteer. Economic Nexus is not a requirement when determining volunteer status, and should not be considered when completing the Volunteer Status section of this document.

## **I. COMPANY INFORMATION**

Business Entity Type:

*If Sole Proprietor, skip to section II: Sole Proprietor Information.*

Federal Employer Identification Number (FEIN):

Legal Business Name:

DBA Business Name (if different from above):

State of Incorporation or Organization:

## **II. SOLE PROPRIETOR INFORMATION** *(if applicable)*

Social Security Number:

Full Name (First, Middle Initial, Last):

## **III. COMPANY ADDRESS INFORMATION**

Address 1:

Address 2:

City:

State:

Zip:

Country:

Telephone:

Extension:

### **Mailing Address**

*If same as above, check this box:*

Address 1:

Address 2:

City:

State:

Zip:

Country:

## **IV. COMPANY CONTACT INFORMATION**

Name:

Title:

Email:

Telephone:

Extension:

## V. AFFILIATED BUSINESSES

Affiliated businesses are companies with shared ownership or interests, also known as “related persons” under section 267(b) or 707(b) of the Internal Revenue Code.

Is your company affiliated with any other company that is (currently, previously, or will be) a Streamlined Sales Tax (SST) Model 1 participant, who has engaged Avalara as its Certified Service Provider (CSP)?

If “yes,” please supply the company(s) name and SSTP Identification Number(s):

## VI. PRODUCT-SERVICE INFORMATION

Enter a NAICS code that best describes your primary source of business (For reference [www.naics.com](http://www.naics.com))

List type of products and services offered for sale to customer base:

Percentage of products and services considered taxable:

## VII. SST STATE SELECTION

Select the states in which you want to register as part of the SST program:

Arkansas	North Dakota
Georgia	Ohio
Indiana	Oklahoma
Iowa	Rhode Island
Kansas	South Dakota
Kentucky	Tennessee*
Michigan	Utah
Minnesota	Vermont
Nebraska	Washington
Nevada	West Virginia
New Jersey	Wisconsin
North Carolina	Wyoming

\*If you have a physical location in Tennessee, Avalara is unable to support Tennessee as part of the SST program

## VIII. NEXUS INFORMATION

Prior to registering with SST, please identify SST states where your organization is currently registered or not registered to collect and remit sales tax. For currently registered states please note the month and year of the original registration and your current filing frequency.

	<b>Registered?</b>	<b>Date of Registration</b>	<b>Filing Frequency</b>
Arkansas			
Georgia			
Indiana			
Iowa			
Kansas			
Kentucky			
Michigan			
Minnesota			
Nebraska			
Nevada			
New Jersey			
North Carolina			
North Dakota			
Ohio			
Oklahoma			
Rhode Island			
South Dakota			
Tennessee			
Utah			
Vermont			
Washington			
West Virginia			
Wisconsin			
Wyoming			

## IX. SST REGISTRATION INFORMATION

Has your organization previously registered with the SST Governing Board?  
*(If yes, complete the next three questions)*

SST Identification Number:

SST Registration Effective Date:

SST Password (permits Avalara's Tax Compliance Officer to access SST information):

## X. SST STATE REGISTRATION INFORMATION

You are considered to have Volunteer Status in a SST State, if ALL FOUR (4) of the following statements are TRUE for the prior twelve (12) month period. Use the drop-down menus to select whether ALL OF THE FOLLOWING are “true” or “false” for each state.

1. Our organization has had no fixed place of business for more than thirty (30) days in the Member State.
2. Our organization has less than \$50,000 of property in the Member State (weighted average over the preceding 12 months, this includes both real property and tangible personal property owned or rented).
3. Our organization has less than \$50,000 of payroll in the Member State. This includes total amount paid to employees for compensation (wages, salaries, commissions, etc.).
4. Our organization has less than twenty-five percent (25%) of its total property or total payroll in the Member State.

Arkansas

North Dakota

Georgia

Ohio

Indiana

Oklahoma

Iowa

Rhode Island

Kansas

South Dakota

Kentucky

Tennessee

Michigan

Utah

Minnesota

Vermont

Nebraska

Washington

Nevada

West Virginia

New Jersey

Wisconsin

North Carolina

Wyoming

## XI. ADDITIONAL QUESTIONS RELATED TO SST STATES

- [Washington](#)
- a. After reviewing the WA B&O information, are you required to file for WA B&O?
  - b. If “yes,” do you want Avalara to file the monthly WA B&O on your behalf?

- [Indiana](#)
- a. If you are previously registered with Indiana, have you been notified of your collection allowance percentage?
  - b. If “yes,” please select what your percentage is so we can automatically include it on your Indiana returns.

How were you introduced to the SST program?

Why are you joining the SST program?

Other:

Other:

## **XII. CONFIRMATION OF ACCURACY**

To the best of my knowledge and belief, my statements in this request for the SST Application are complete and true.

Signature

Date

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Printed Name

Title