

## REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

(FOR USE BY U.S. CITIZENS, U.S. ENTITIES, OR RESIDENT ALIENS ONLY)

Under the United States Internal Revenue Code, Indiana University is required to obtain Taxpayer Identification Numbers (TIN) when making reportable payments to individuals or corporations. If this information is not provided, certain payments may be subject to a backup withholding rate of twenty-eight percent (28 %). Also, if you fail to furnish a correct TIN, the IRS can access a penalty of \$50 unless failure to comply is due to reasonable cause and not willful neglect.

**Instructions:** Complete all parts and return this form to the requesting IU department. This completed form is required to be filed with the University before payment can be processed. For more detailed instructions, see <a href="http://www.fms.indiana.edu/tax/forms/W9\_Alternative\_Instruction.pdf">http://www.fms.indiana.edu/tax/forms/W9\_Alternative\_Instruction.pdf</a>.

Part I - Name, Address and Tax Status	s		
Legal Name:			
(As reported for Fed	deral income tax purposes and mated Security Number, the Legal Name M		
Business or Trade Name:(Should only b	be used if you are "doing business as" (	(dba) a different name t	han the Legal Name.)
Address:			
City:	ST	ZIP	
Telephone Number:	Fax Num	nber:	
Ownership status (Please indicate 2 Individual (SSN) Sole-Proprietor (SSN or EIN) C Corporation (EIN) S Corporation (EIN)	Single-Member LLC (SSN/EIN) the LLC (EIN) Enter the tax classification (C=Corporation S=S corporation, P=Partnership (EIN)	ation	Estate / Trust (EIN) Non-Profit Organization (EIN) Governmental (US, State, Local) (EIN) Other
In addition to the above, please che	eck one of the below if you perform o	either Health Care or	Legal Services:
Health Care Services	Legal Serv	rices	
Tax ID number (TIN) as reported for	federal income tax purposes and ma	ntches Legal Name pro	vided above:
Social Security Number/	ITIN <u>OR</u>	OR Employer Tax ID Number	
	[only one]		
			oneous backup withholding. Enter your correctind return to requester. (individuals, sole
Part III – Certification Instructions: You must cross out item 2 have failed to report all interest or divide		e IRS that you are curren	ntly subject to backup withholding because you
number to be issued to me), and (2) I am	not subject to backup withholding becackup withholding as a result of a failu	cause (a) I am exempt four to report all interest	entification number (or I am waiting for a rom backup withholding, or (b) I have not been or dividends, or (c) the IRS has notified me efined below).
Signature	Date	Ti	tle
Department Use Only Vendor #		Phone #	