



University of Arizona  
 FSO-Operations  
 PO Box 3607  
 Tucson, AZ 85722-3607  
 (520) 621-9097

**Form W-9 Federal Taxpayer Identification Number Request**

Vendor Name and Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date: \_\_\_\_\_ Vendor Number: \_\_\_\_\_

Please complete the following information if you are a U.S. person (including a resident alien). We are required by law to obtain this information from you when making a reportable payment to you. If you do not provide us with this information, your payments may be subject to 28% federal income tax backup withholding. Also, if you do not provide us with this information, you may be subject to a \$50 penalty imposed by the Internal Revenue Service under section 6723.

**If you are a foreign person, you need to complete a Form W-8. Please contact the Tax Team at 1-520-621-9097 or email us at [accts\\_pay@arizona.edu](mailto:accts_pay@arizona.edu).**

**Instructions:** Complete Part 1 by checking the federal tax classification types that correspond to your organization's structure. Complete Part 2 by filling in your Federal Tax Identification Number and the name of person or entity it belongs to. To complete Part 3 sign, date, and return the form to the address listed below.

**Part 1: Check all that apply to your organization. (You must check at least one.)**

- Limited Liability Company
- Corporation (A corporation may use an abbreviated name or its initials, but its legal name is the name on the articles of incorporation.)
- Tax Exempt Charity under 501 (a and c), or IRA - (Non-Profit Organization)
- The United States or any of its agencies or instrumentalities
- A state, the District of Columbia, a possession of the United States, or any of their political subdivisions
- A foreign government or any of its political subdivisions
- Real Estate Agent or Agency
- Individual
- Proprietor (A sole proprietorship may have a "doing business as" trade name, but the legal name is the name of the business owner.)
- Partnership (A partnership may have a "doing business as" trade name, but the legal name is the list of the names of the partners.)

**Part 2: Provide your Federal Tax Identification Number and the name of the person or entity whose TIN you enter.  
 The TIN must be for the payee shown above.**

\_\_\_\_\_  
 Individual, sole proprietor, or partnership's legal name (name of first partner) Social Security Number

\_\_\_\_\_  
 Name of business, trade, partnership, DBA, corporation, charity, or other entity Employer Identification Number

**Part 3 Certification:** I certify under penalty of perjury:

1. The number shown on this form is my correct taxpayer identification number.
2. I am not subject to backup withholding because (a) I am exempt from back up 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 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 (including a resident alien)

Person completing this form: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

**Please return this form to the above address, fax to 1-520-626-1243 or email the information to: [accts\\_pay@arizona.edu](mailto:accts_pay@arizona.edu).**