

Florida International University - Miami's Public Research University
Business and Finance - Controller's Office
Request for Taxpayer Identification and Certification
(Substitute for IRS Form W-9)

Name _____

Business Name, if different from above _____

Check appropriate box: Individual/Sole proprietor Corporation Partnership
 Other _____
 Nonresident Alien (Do not use this form. Contact the Controller's Office- Tax Section @ (305) 348-6764).

Address (number, street, and apt. or suite no.) _____

City, State, and ZIP code _____

Part I – Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). For other entities, it is your Employer Identification Number (EIN).

Social Security Number SSN	Employer Identification Number EIN	Individual Taxpayer Identification Number ITIN

Part II - Exemption

If exempt from 1099 reporting, check here: and circle your qualifying Exemption reason below:

1. Corporation, except there is no exemption for medical and healthcare payments or payments for legal services.
2. Tax Exempt Charity under 501(a), or IRA
3. The United States or any of its agencies or instrumentalities
4. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions
5. A foreign government or any of its political subdivisions

Part III – Certification

Under the 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. person (including a U.S. resident alien).

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

Signature:	Date:
Name of Individual Completing this Form:	Title:
Telephone Number:	E-mail address: