W-9 Form University of Florida

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Substitute Form W-9 Taxpayer Identification Number Request Rev. 10/2003. For payments other than interest, dividends, or Form 1099-B

Substitute Form v	V-9 Taxpayer Identification Nun	nber Request i	Rev. 10/2	2003.	For	payn	nen	ts otn	er i	nan	ınte	rest,	aivi	aenas	, or Fo	rm 1	099-B	gross	proc	eeas
Please complete the following information. 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 \$50.00 penalty imposed by the Internal Revenue Service under section 6723.						nonresident alien and have now become a resident alien, read the note below and attach a statement, if necessary.														
Federal law on backup withholding preempts any state or local law remedies, such as any right to a mechanic's lien. If you do not furnish a valid TIN, or if you are subject to backup withholding, the payor is required to withhold 28% of its payment to you. Backup withholding is not a failure to pay you. It is an advance tax payment. You should report all backup withholding as a credit for taxes paid on your federal income tax return.					"saving clause" to exempt certain types of income from U.S. tax even after you have become a Resident Alien, and you want to claim that exemption, fill out all of this form AND attach a page showing:															fill
 Instructions: Complete Part 1 by completing the one row of boxes that corresponds to your tax status Complete Part 2 if you are exempt from Form 1099 reporting Complete Part 3 by filling in all lines Return this completed form to us in the enclosed envelope 					The treaty country The treaty article about the income The article number for the "saving clause" The type and amount of income that qualified for the saving clause Facts that provide a sufficient explanation of why the saving clause applies															es
Finance and Accounti and use of Social Sec	of Social Security Numbing is mandated by 26 U.Sturity numbers at UF, pleast (complete only one set of boxes)	S.C. 6041 a ise visit: <u>htt</u>	nd rela	ted	IRS	re	gul	atio	าร.	If y	ou/	ha								
Individuals:	Individual Name First name	Middle initial			Last	name								- dividua	l's Socia	-	rity Nur	nher		
	individual Name First name			Lasi	name								Individual's Social Security Number							
A sole proprietorship may	have a "doing business as" trad	e name, but th	ne legal r	name	is th	ie na	me	of th	e b	usin	ess	owr	ner.							
Sole Proprietor (or an LLC with one owner):	Business Owner's Name: (I	Business Owner's Name: (REQUIRED)				ness (Owne	er's So	cial :	Securi	ty Nı	ımber	-	1	Business	or Tra	ade Nan	ne (OPT	IONAL	-)
						-														
	(First Name)	(Middle	initial)			or E	mple	oyer ID	Nui	nber										
	(Last Name)																			
[_ [Π		Т							
Partnership (or an LLC with multiple owners):	Name of Partnership			F	Partne		s Em	mployer Identification Number Partnership's Name o										ecords	;	
A corporation may use an	abbreviated name or its initials,	but its legal na	ame is th	ie nai	me c	n the	e ar	ticles	of	inco	rpo	ratio	n.	_						
Corporation or tax exempt entity:	Legal Name of Corporation or Entity					-		Identif	a a ti	an Nive										
exempt entity.	Legal Name of Corporation of Emity					EIIIþi	Oyei	iuerilii	ICali	JII NUI	IIIDEI									
Part 2 - Exemption:	if exempt from Form 1099 repo	rting, check y	our quali	ifying	exe	mpti	on	reaso	on I	oelov	Ν.									
Corporation Note that there is no corporate exemption for medical and healthcare payments or payments for legal services	Tax Exempt Entity under 501 (a) (includes 501 (c) (3), or IRA)	☐ The U any of instrur	ies or				A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or agencies						A foreign government or any of its political subdivisions or an international organization in which the United States participates under a treaty or Act of Congress					ons		
Part 3 - Certification Person completing this form							Т	itle:												
Tax Correspondence Addi	ress:																			
Telephone: ()											(Re	emit a	ddress	if differ	ent)					
Under penalties of perjury, I c 1. The number shown on this 2. I am not subject to backup of	ertify that: form is my correct taxpayer identifica withholding because (a) I am exempt a result of failure to report all interest	from backup wit	hholding,	or (b)	I hav	e not	bee	en not	ified	by th	ne Ir	iterna						am su	bject	

Date: ____

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Signature of U.S. Person: ___