

2009



DePaul University

SUBSTITUTE FORM W-9

VENDORS (NON-DEPAUL EMPLOYEES) OF DEPAUL UNIVERSITY ARE REQUIRED TO FURNISH THEIR TAX INFORMATION, CERTIFYING TAX STATUS AND ENTITY CLASSIFICATION PRIOR TO DOING BUSINESS WITH DEPAUL UNIVERSITY.

LEGAL NAME (as shown on your income tax return)

BUSINESS NAME (if different from above)

ADDRESS (number, street, apt. # or suite #)

CITY, STATE, ZIP CODE

TELEPHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

Please provide a brief description of the goods and/or services your business provides:

Y **N** Do you accept credit card payments?

PART I TAXPAYER IDENTIFICATION NUMBER (TIN)

SSN

EIN

U.S. Individual / Sole Proprietor (SSN or EIN) **U.S. Partnership** (EIN) **U.S. Corporation** (EIN)

U.S. Limited Liability Company (EIN) Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) → _____

Exempt Organization, Federal, State, or Local Government Agency (EIN)

PART II MINORITY BUSINESS INDICATOR

Women-Owned Business Black Hispanic Disabled
 Asian or Pacific Islander Native American or Alaskan Native Other _____

PART III CERTIFICATION

Under penalties of perjury I certify that:

1. The number shown on this form is my correct taxpayer Identification number, 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), and
4. I certify that the information provided on this form is accurate.

SIGN
HERE →

SIGNATURE OF U.S. PERSON REQUIRED

DATE

PRINT
NAME

TITLE

RETURN COMPLETED FORMS TO:

**DEPAUL UNIVERSITY • 1 EAST JACKSON BLVD., 19th FLOOR • ACCOUNTS PAYABLE • CHICAGO, IL. 60604
PH 312-362-5382 • FX 312-362-8440 • EMAIL accountspayable@depaul.edu**

FOR INTERNAL AP CONTROL VNR# _____ UPDATE _____ LOG _____ SCAN _____ FILE _____ 01/09