



DO NOT send to the IRS

TAXPAYER IDENTIFICATION NUMBER (TIN) VERIFICATION

**NO PAYMENTS WILL BE RELEASED UNTIL THIS FORM IS COMPLETED LEGIBLY, SIGNED & RETURNED**

Federal law requires that we have on file a W-9 form with the Employer ID number or Social Security Number and signature for each person to whom the University makes a payment. Our records show that we do not have a current W-9 form on file for you.

Please complete this form and return to: **UW Milwaukee, Accounts Payable, PO Box 966, Milwaukee, WI 53201.**

**PHONE:** 414-229-5404. If you prefer you can **FAX** the form to 414-906-8433 or **EMAIL** to [joheidt@uwm.edu](mailto:joheidt@uwm.edu).

**PRINT OR TYPE**

See reverse side for complete instructions. This form can be made available in alternative formats to qualified individuals upon request.

**Exemptions (see instructions)**

- Exempt payee code (if any)	_____
- Exemption from FATCA reporting code (if any)	_____
For instructions, see: <a href="http://www.irs.gov/">http://www.irs.gov/</a> , W9 forms	

**Legal Name** (as IRS documented) -- Sole Proprietorship/LLC Single Owner, enter your Last, First, MI

**Trade Name** -- Enter Business Name if different from above

**Remit Address** - where all legal documents are mailed (Street, City, State, Zip)

**College/Campus addresses are not considered legal addresses**

**Order Address** (where order should be mailed; complete only if different from remit)

**1099 Address** (for return of 1099 form; complete only if different from remit)

**Entity Designation (check only one)-REQUIRED**

- Individual/Sole Proprietor/LLC Single Owner
- Corporation (includes Service Corporations)
- Limited Liability Company-Partnership
- Limited Liability Company-Corporation
- Government Entity
- Hospital Exempt from Tax/Govern. Owned
- LongTerm Care Facility Exempt from Tax/Government Owned
- All Other Entities

**Taxpayer Identification Number (TIN)-REQUIRED**

If you are a sole proprietor & you have an EIN, you may enter either your SSN or EIN, however, the IRS prefers that you show the SSN.

- Social Security Number (SSN)
- Employer Identificaiton Number (EIN)
- Individual Taxpayer ID Number - US Resident Aliens (TIN)

**TAX ID NUMBER-MUST BE 9 DIGITS**

**REQUIRED**

**Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number, AND
- I am not subject to back up 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 back up 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
- I am a US person (including a US resident alien).

**Penalty You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% on taxable payments to a payee who does not furnish a TIN to a payer. Certain other IRS penalties may also apply.**

Printed Name	Printed Title	Telephone Number/Email Address
Signature		Date (mm/dd/ccyy)