DO NOT SUBMIT TO THE IRS - SUBMIT FORM TO THE NEW YORK CITY AGENCY 10/14 REVISION	THE CITY OF NEW YORK SUBSTITUTE FORM W-9: REQUEST FOR TAXPAYER IDENTIFICATION NUMBER & CERTIFICATION	NYC FMS

TYPE OR PRINT INFORMATION NEATLY. PLEASE REFER TO INSTRUCTIONS FOR MORE INFORMATION.

Part I: Vendor Information

1. Legal Business Name: (As it appears on IRS EIN records, IRS Letter CP575, IRS Letter 147C -or- Social Security Administration Records, Social Security Card)

2. If you use DBA, please list below:

3. Entity Type (Check one only):

☐ Church or Church-Controlled Organization ☐ Personal Service Corporation

☐ Non-Profit Corporation ☐ Corporation/ LLC ☐ Government ☐ City of New York Employee ☐ Individual/ Sole Proprietor ☐ Trust

☐ Joint Venture ☐ Partnership/ LLC ☐ Single Member LLC (Individual) ☐ Resident/Non-Resident Alien ☐ Non-United States Business Entity ☐ Estate

Part II: Taxpayer Identification Number & Taxpayer Identification Type

1. Enter your TIN here: *(DO NOT USE DASHES)*

2. Taxpayer Identification Type (check appropriate box):

☐ Employer ID Number (EIN) ☐ Social Security Number (SSN) ☐ Individual Taxpayer ID Number (ITIN) ☐ N/A (Non-United States Business Entity)

Part III: Vendor Addresses

	Number, Street, and Apartment or Suite Number	City, State,and Nine Digit Zip Code or Country
1. 1099 Address:		
2. Account Administrator Address:		
3. Billing, Ordering & Payment Address:		

Part IV: Exemption from Backup Withholding and FATCA Reporting (See Instructions)

Exemption Code for Backup Withholding _____ Exemption Code for FATCA Reporting _____

Part V: 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 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 US citizen or other US person, and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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

Sign Here:

Signature _____ Phone Number _____ Date _____

Print Preparer's Name _____ Phone Number _____ Contact's E-Mail Address: _____

FOR SUBMITTING AGENCY USE ONLY

Submitting Agency Code: ____ Contact Person: _____

Contact's E-Mail Address: _____ Telephone Number: ( )

Payee/Vendor Code: ____ ____

DO NOT FORWARD W-9 TO COMPTROLLER'S OFFICE. FAX COMPLETED FORM TO THE REQUESTING SCHOOL/DOE OFFICE.