

## Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Befo	<b>re you begin.</b> For gui	dance related to the purpose of I	Form W-9, see Purpose of Form,	below.											
	Name of entity/ind entity's name on li		le proprietor or disregarded entity, en	ter the owner's r	name	on line	1, an	d ente	r the	busi	ness	/disre	egarded		
e,	Indiana Universit	y													
	2 Business name/disregarded entity name, if different from above.														
	Trustees of Indiana University  3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.								4 Exemptions (codes application contain entities, not individual)						
on page	☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate								see instructions on page 3):						
Print or type. See Specific Instructions	LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)									Exempt payee code (if any)3					
	Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.								Exemption from Foreign Account Compliance Act (FATCA) reporting						
	Other (see instructions) State of Indiana Governmental Tax Exempt Organization									code (if any) C3					
Specifi	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions								(Applies to accounts maintained outside the United States.)						
See	5 Address (number, street, and apt. or suite no.). See instructions. Requester's name							and address (optional)							
	1024 E 3rd Street, Room 132  6 City, state, and ZIP code														
	Bloomington, IN 47405														
	7 List account number(s) here (optional)														
Pa		Identification Number (T	•		So	cial ca	curit	, numl	hor						
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a															
resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other										-					
entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN, later.															
Note: If the account is in more than one name, see the instructions for line 1. See also What Name and									ion n	umb	er		=		
									1	6	7	3			
Par	t II Certificat	ion			-										
	r penalties of perjury,	•													
			dentification number (or I am wait exempt from backup withholding	-							nal F	Revei	nue		
Se	rvice (IRS) that I am s		a result of a failure to report all in												
		ner U.S. person (defined below);													
			g that I am exempt from FATCA				1. *		1						
			if you have been notified by the IR n your tax return. For real estate tra												
			of debt, contributions to an individual to a contribution but you must not												
Sigr		derius, you are not required to sign	the certification, but you must pro	ovide your com	ect II	IIV. SE	e trie	IIISIIU	Ctioi	15 10	ГГа	rt II,	iater.		
Here	U.S. person	Small 10 x	ulux	Date 4/1	5/20	)24									
Г	Please Note: Th	e address listed above is	to be used only for tax r	reporting p	urp	oses	pe	r the	W	-9		ntity			
l	instructions. All payments to Indiana University should be directed to the specific PO Box and											e Fo	rm W-9		
l	Department listed below.											mat	st. This ion		
l	Other Payme	Other Payment Methods: https://controller.iu.edu/services/customers/invoice-payment										r			
Domit Address for									III		3. Se	reign ee the			
Remit Address for Indiana University Contact Indiana University							•								
	Payments:	Dept. 78920	Information:	Accounts	counts Receiva				able						
		P.O. Box 78000		nonstdar	@iu	.edu						o file			
Detroit, MI 48278-0920 Phone: (317) 274-5004															
		*Please include the invoice stub with your lockbox payments.											. 3-2024)		