



Loyola University of Chicago
Vendor Information and
Substitute W-9 Form

Return Completed forms to:
 Loyola University Chicago
 Accounts Payable Department
 820 North Michigan Avenue; Suite 603
 Chicago, Illinois 60611
 Fax – 312/915-8736
 E-mail –ACCOUNTS-PAYABLES@luc.edu

Preparing people to lead extraordinary lives

Name (As Shown on your income tax return) _____ Website (URL) _____

Business/parent name/disregarded entity name, if different from above _____

Address (number, street, and apt or suite number) _____

City _____ State _____ Zip Code _____

Employer Identification Number - or - Social Security Number (SSN) _____

Federal Tax Classification:

- Foreign Alien or Entity - Must complete and attach appropriate Form W-8
- Individual/Sole Proprietor C Corporation S Corporation Partnership Trust / Estate
- Limited Liability Company _____ Other _____

(Enter the tax classification: C=C Corporation, S=S Corporation, P=Partnership)

Exempt payee code (if any) _____ Exempt from FATCA reporting code (if any) _____

NAICS # (North American Industry Classification System) www.census.gov/eos/www/naics/

- Women-Owned (WBE) Veteran-Owned Service Disabled Veteran-owned
- HUBZone Minority (MBE) Disadvantaged (DBE)

If selected DBE, please indicate the DBE classification as defined in FAR – Small Business Programs – Part 19.001 Definitions:

- African American Native American Asian American Hispanic American Other _____

NAICS Certified by: _____ (Attach copy of the Certification)

(Misrepresentation – Reference: Small Business Program Representations – FAR 52.219-1[d] [2])

Dun & Bradstreet Number _____

Payment Preference:

- ACH Check E-Payables (Contact Loyola to establish an account)

If you elect to receive your payments via ACH, please provide:

Bank/Institution Name _____

Bank Identification/Account Number _____ Routing Number _____

Contact Information:

Principal Contact _____ E-Mail Address _____ Phone Number _____ Fax Number _____

Sales Representative _____ E-Mail Address _____ Phone Number _____ Fax Number _____

Customer Service _____ E-Mail Address _____ Phone Number _____ Fax Number _____

Accounts Receivable / Credit _____ E-Mail Address _____ Phone Number _____ Fax Number _____

Send All Orders To _____ E-Mail Address _____ Phone Number _____ Fax Number _____

Certification:

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), 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. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

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

Signature of the Authorized Representative _____ Date _____ Phone Number _____

Print Name _____ Title _____