

THE UNIVERSITY OF TEXAS AT AUSTIN  
**PAYEE INFORMATION FORM-SUBSTITUTE W-9/W-8**

**Section I. This section required for all entities**

1. Name (as shown on your income tax return) \_\_\_\_\_

2. Business Name/disregarded entity name, if different from above \_\_\_\_\_

3. Address: \_\_\_\_\_ Phone: \_\_\_\_\_

(number, street, and apt. or suite no.)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Foreign Address: \_\_\_\_\_

(Enter foreign city, province or state, foreign postal code, and country)

Email Address: \_\_\_\_\_

**5. Exemptions** (codes apply only to certain entities, not individuals).  
Enter Exempt Payee Code (if any): \_\_\_\_\_  
Exemption from FATCA reporting code (if any): \_\_\_\_\_  
(applies to accounts maintained outside the U.S.)

4. Taxpayer Identification Number (TIN) The TIN provided must match the name given on line 1 to avoid backup withholding.

\*SSN or ITIN \_\_\_\_\_

Employer Identification Number (EIN) \_\_\_\_\_

**Individuals complete Part I & IV, Partnerships complete Part II & IV, Corporations or other Entities complete Part III & IV**

**Part I. INDIVIDUAL OR SOLE PROPRIETOR** (Check **one** of the following)

(Individuals/sole proprietors MUST provide a copy of social security card or photo id)

**A. I - Individual** (not owning a business)

**S - Sole Proprietor of Business** (May also provide an EIN in Section 1, line 4, for tax reporting, if desired, see Taxpayer Name & Number on back)

**S - Single Member LLC**

**B. Citizenship Status:** I attest under penalties of perjury that I am (check **one** of the following):

1.  A citizen or national of the United States. Provide SSN in section 1, line 4.

2.  A Nonresident Alien (Complete C. below). Provide SSN or ITIN in section 1, line 4, if applicable.

3.  A Lawful Permanent Resident. Provide Alien #: \_\_\_\_\_ and provide SSN in section 1, line 4.

**C. Nonresident Alien Information** - If you do not have an SSN or ITIN, check here

Citizen of: \_\_\_\_\_ Number of Days in the U.S.A. this calendar year: \_\_\_\_\_

Permanent Resident of: \_\_\_\_\_ Number of Days in the U.S.A. in the past 12 months: \_\_\_\_\_

Email [oa.ic@Austin.utexas.edu](mailto:oa.ic@Austin.utexas.edu) with your current visa status if you need a current year tax residency or income tax treaty determination.

**Part II.  P - PARTNERSHIP**

Enter two partner's names and Social Security Numbers. If either partner is a corporation, provide the corporation's EINs below. Also provide the partnerships's EIN in section 1, line 4.

Partner's Name \_\_\_\_\_ \*SSN/EIN \_\_\_\_\_

Partner's Name \_\_\_\_\_ \*SSN/EIN \_\_\_\_\_

**P - LLC THAT FILES AS A PARTNERSHIP** (Provide EIN in section 1, line 4)

**Part III. CORPORATION, LLC THAT FILES AS A CORPORATION, OR OTHER ENTITY** (Check **one** of the following)

**T - Texas Corporation or Texas' LLC that files as a Corporation**

**A - Texas Professional Association**       **C - Texas Professional Corporation**       **L - Texas Limited Partnership**

If T, A, C, or L is checked, enter Texas File Number \_\_\_\_\_

**O - Out of State Corp, Out of State LLC that files as a Corp, Out of State Professional Association, Out of State Professional Corp or Out of State Limited Partnership**

**G - Governmental entity**       **U - State agency / University**       **F - Financial Institution**

**R - Foreign Business (outside the U. S. A.)**       **N - Other** \_\_\_\_\_ (Description Required)

**Part IV. CERTIFICATION. This section required for all entities**

Under penalties of perjury, I certify that the information provided on this form is, to the best of my knowledge, true, correct, and complete.

PAYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Warning:** Failure to provide the correct name and number combination may result in payment being subject to 28% backup withholding. See Taxpayer Name and Number on back.

Univ of Texas Dept Contact Name: \_\_\_\_\_ Contact's Email Address: \_\_\_\_\_

**Vendor:** Return signed form to the UT department who sent you the form.

**Departments:** Submit completed form to the Vendor ID Section. For instructions on submitting completed forms and creating GGV documents visit [http://www.utexas.edu/business/accounting/vid\\_info.html](http://www.utexas.edu/business/accounting/vid_info.html)

Are you a state-certified Historically Underutilized Business (HUB)? Yes  No  If not, do you qualify? Yes  No  (If Yes, see back for details)

\*Disclosure of your Social Security Number is required. Refer to pg 2, General Instructions, of the State of Texas Application for Texas Identification Number, <http://comptroller.texas.gov/taxinfo/taxforms/ap-152.pdf>.