

Name:

Address:

## City, state & zip:

Legal name you report your income tax under (if different):

## CNM Department You Are Working With: ECECD-CNMI

Central New Mexico Community College is required by law to obtain this information from you when making a reportable payment to you. If you do not provide us with this information, your payments may be subject to 28% federal income tax backup withholding. You may also be subject to a \$50 penalty imposed by the IRS under code section 6723. Federal law on backup withholding preempts any state or local law remedies, such as any right to a mechanic's lien. If you do not furnish a valid TIN, or if you are subject to backup withholding, we are required to withhold 28% of payment.

Type of Payee: Organization Type (choose one)	Please indicate if any of the following categories apply to your business:
Individual/Sole Proprietor/Single Member LLC	Attorney or Legal Firm
Partnership Government	Medical Service
Corporation	
Trust/Estate	Rent
Limited Liability Company	Royalties
O S Corporation	
TAXPAYER IDENTIFICATION NUMBER (TIN) – Tax ID # associated wi	th legal name above
Federal ID Number (also known as an Employer Identification Number)	
Or	
Social Security Number	
If exempt from form 1099 reporting, please select your qualifying exemption reason below:	
Corporation except there is no exemption for medical, healthcare, or Corporation except there is no exemption for medical, healthcare, or Corporation except there is no exemption for medical, healthcare, or Corporation except there is no exemption for the US or ar Sol (a) includes Corporation except there is no exemption for medical, healthcare, or Corporation except there is no exemption for medical, healthcare, or Corporation except there is no exemption for the US or ar charity under charity charity	Or     Columbia, a possession     its political subdivisions       ties     of the US or any of their
legal payments 501(c)(3)	political subdivisions
<ul> <li>Certification: Under penalties of perjury, I certify that: <ol> <li>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</li> <li>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</li> <li>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</li> <li>I am a US citizen or other US person (defined below); and</li> <li>The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.</li> </ol> </li> <li>Certification instructions:</li> <li>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.</li> </ul>	
Name :	Title:
e-Signature:	Date:
Email Address:	Phone:
Direct Deposit (ACH) Required information (If you elect to be paid by direct deposit instead of check)	
Bank Name:	
Bank Address:	
Routing #: Acco	unt #:
Checking account Sav	ings account

Email address for deposit alerts:

## **Taxpayer Identification Number Request**

Substitute Form W-9

Use this form only if you are a US citizen (including US resident alien);if you are a foreign person, use the appropriate form W-8BEN.

Vendor Code: (Internal Use only)

ROUTING: cnmw9@cnm.edu or mail to CNM, Attn: Chris Grant PO Box 4586 Albuq;NM 87196-4586