

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:

ROUTING: cnmw9@cnm.edu or mail to CNM, Attn: Yvette Zamora

PO Box 4586 Albuq;NM 87196-4586

Name Doe	Namo:	Jane	Doe
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123 Any Street Address:

City, State, 00000 City, state & zip:

Email address for deposit alerts:

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 Partnership Government Corporation Other Trust/Estate Limited Liability Company C Corporation	Attorney or Legal Firm Medical Service Rent Royalties
Os Corporation	
O Partnership	
TAXPAYER IDENTIFICATION NUMBER (TIN) – Tax ID # associ	ated with legal name above
Federal ID Number (also or	known as an Employer Identification Number)
123-45-6789 Social Security Number	
If exempt from form 1099 reporting, please select your qualifying exer	nption reason below:
there is no exemption for charity under its ac	US or any of Columbia, a possession of the US or any of their political subdivisions
Service (IRS) that I am subject to backup withholding as a result of a failure no longer subject to backup withholding; and 3. I am a US citizen or other US person (defined below); and 4. The FATCA code(s) entered on this form (if any) indicating that I am ex Certification instructions: You must cross out item 2 above if you have been notified by the IRS that interest and dividends on your tax return. For real estate transactions, item	backup withholding, or (b) I have not been notified by the Internal Revenue re to report all interest or dividends, or (c) the IRS has notified me that I am empt from FATCA reporting is correct. I you are currently subject to backup withholding because you have failed to report all in 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured angement (IRA), and generally, payments other than interest and dividends, you are
Name: Jane Doe	Title:
e-Signature: Jane Doe	Date: 01/01/2024
Email Address: jane.doe@gmail.com	Phone: 123-456-7890
Direct Deposit (ACH) Required information (If yo	u elect to be paid by direct deposit instead of check)
Bank Name: Your Bank Name	
Bank Address: Your Bank Address	
Routing #: 011011111	Account #: 000123456789
Checking account	Savings account

jane.doe@gmail.com (use personal email address, not work address)