



CHICAGO BOTANIC GARDEN

SUBSTITUTE FORM W-9 VENDOR REGISTRATION FORM

Pursuant to Internal Revenue Service (IRS) Regulations, vendors must furnish their Taxpayer Identification Number (TIN) to the Garden. If this number is not provided, you may be subject to a 20% withholding on each payment. To avoid this 20% withholding and to insure that accurate tax information is reported to the Internal Revenue Service and the Garden, please use this form to provide the requested information exactly as it appears on file with the IRS.

Name: _____ DBA/Trade Name (If applicable): _____

Address (number, street, and apt. or suite no.): _____ City, State, and Zip: _____

Individual/sole proprietor

C Corporation

S Corporation

Partnership

Trust/estate

Exempt payee

Limited liability company: Enter the tax classification
(C=C Corp, S=S Corp, P=Partnership) ▶ _____

Other/specify ▶ _____

Enter your Taxpayer Identification Number (TIN) in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). For other entities, it is your employer identification number (EIN).

Social Security Number: _____ Employer Identification Number: _____

Do you accept MasterCard for payment? Yes No

The Garden is committed to enhancing the economic opportunities for minority and women owned businesses that provide our institution with goods and services. Pursuant to the Garden's Supplier Diversity Program, please identify whether your business is a certified minority or woman owned business.

Minority Woman

If you are a minority- or woman-owned certified business, please indicate the certifying agency and include proof of certification:

City of Chicago

Cook County

Chicago Minority Supplier Development Council

Women Business Development Council

Illinois Department of Central Management Services

Other

Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification, 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 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. person (including a U.S. resident alien).

The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. For complete certification instructions, please see IRS form W-9.

Name

Title

Signature

Date

Phone Number

E-mail

Please forward this form and proof of minority- or woman-owned certification (if applicable):

- **Fax:** 847-835-8298, attention Accounts Payable
- **Or Scan and E-mail:** ap@chicagobotanic.org
- **Or Mail:** Chicago Botanic Garden, Attn: Accounts Payable, 1000 Lake Cook Road, Glencoe, IL 60022