JNIVERSITY.	Taxpayer Information															
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· · ·	Name (Must match IRS records & the Taxpayer Identification Number)						Area code and phone number									
Jane Doe  Business Name (If different from above or Doing Business As (DBA))							123-456-7890									
Business Name	1		Fax Number							1						
Address (number street and ant as suite number)							Email Address (required for ACII) atification									
Address (number, street, and apt. or suite number)  123 Roilormakor Court					1		Email Address (required for ACH notifications)							)		
123 Boilermaker Court					ļ		janedoe@gmail.com									
Citv, State, and ZIP Code  West Lafayette, IN 47907							Country									
West Lalay	elle, IN 47 907					<b>A</b>	. /-						_			
For individuals, this	is your Social Security Number (SSN). Re					_	umber (1	•	tificatio	n Nur	nhar (	EINI\ If v	ou de	o not have a number see "H	ow to	
get a TIN" on Pg. 2 c		sident Allens. See page 2 of t	ine ins roini	i ₩-3. O	tilei Liit	ities. Lii	ter your Emp	loyer luci	itilicatio	iii ivui	iibei (	L114). 11 y	ou u	o not have a number, see	ow to	
Enter vou	r US TIN (if available) in the b	ox - SSN or		3	3	3	- 2	2	l _	4		4 4	4 T	4		
							ا ا	1-	<u> </u>	_	+		_			
Employer Identification number 2					2	-	7 7	7	7	7	'	7   7	7			
Business Type (Check One)																
															$\neg$	
Individual / Sole Proprietor or Single-Member LLC																
Limited Liability Company (LLC) If LLC, Enter Tax Classification: (C = C Corp, S = S Corp, P = Partnership)  Other Please specify other:																
	Tember LLC that is disregarded, do not o		ate box abo	ve for th	ne tax cla	ssificat	ion of the Sing	gle-Meml	er own	er.					_	
Exempt	tions (apply only to certain entiti	es, not individuals)						Ci	tizen	ship	(che	eck one	box)			
Exempt payee of	code (if any)					US Ci	tizen				Gla	acier w	ill b	e required if Non-Res	dent Alien is	
							Permanent Resident checked									
Exemption from FACTA reporting code (if any)  Non-Resident Alien or Foreign Entity																
If yes, enter Visa Type:																
(Appl	ies to accounts maintained outside	· · · · · · · · · · · · · · · · · · ·					omplete and		icier file	(wwv	v.onlir	ne-tax.ne	et)			
		Purc	lue Uni	versi	ty-Re	lated	Disclos	ures								
Are you a stude	ent? Yes No	If yes, enter inst	titution				Butler Uni	versity								
Are you a current or former employee of Purdue?  Yes Vo If yes, enter dates:																
Are you a curre	No No		ii ye:	s, enter t	iates.		L		-							
If yes, Do you have an approved Reportable Outside Activity Form?									1							
Do you have immediate relatives who are employed at Purdue?  If yes, List name(s) and department(s):  Yes   ✓ No																
ii yes, List Hairie(s	and department(s).		0		ent N	م ما الم ما	-			1 *			•	. ( D' D	*,	
		<u> </u>		aymo	entiv	ietno	od Ivius			ескі	ng c	or Sav	Ŧ	s for Direct Depos	IT)	
	Direct Deposit for U.S. bank accounts ONLY I request a paper che							_	Checking					Savings		
	Bank Name First Trust					#	Ban	k Phon		5678						
Routing #	12345678	Accou	111L #		1234											
Previous Bank I	Previous Bank Information Required for Bank Changes					Prior	Bank Nam	e								
Prior Routing #	ıting #						or Account #									
		Payment N	lethod	and \	N-9 Ir	nforn	nation Co	ertific	ation							
	ation provided is correct and that I am a													· ·		_
University to initiate cre University Vendor Data	dit entries, and debit entries in the eve Team.	nt of overpayment, to the acc	ount and fin	iancial ir	nstitutioi	1 listed	above. This a	uthorizat	ion will i	remai	n in et	fect unti	il revo	oked by the vendor in writin	g to the Purdue	
	ediately if you have instructed your ban		nic paymen	ts to an	account	outside	the United S	tates. W	will the	en nee	ed to d	collect ac	dditio	nal information from you so	that our bank	
can satisfy its regulatory	obligations. Purdue cannot be respons	sible for any resulting delays.														
	ry, I certify that: (1) The number shown															
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, other U.S. person or international person as I have declared in Citizenship above on this form; and (4) The FACTA code(s) entered																
on this form (if any) indicating that I am exempt from FACTA 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,																
	a nave failed to report all interest and d stributions to an Individual Retirement <i>i</i>															
															7	_
C:	Handwritten or Authent	icated Electronic S	ignature	e Req	uired			Date	e:	3/1	14/2	024				
Signature:				_									_			