



The City of Urbana is accepting bids for the purchase of office supplies for the period September 1, 2015 – August 31, 2017.

Enclosed is a core list of office supplies frequently ordered by various departments with the City of Urbana. Attached are instructions to bidders and the listing of supplies as they are described. If you do not carry the brand listed, please price a similar quality substitute and list the brand name in the "substitute" column. I have listed the item number from our previous vendor; this may or may not help.

****Please read all attached documents before submitting a proposal****

Return the completed Purchase Certification Form, Equal Employment Opportunity Workforce Statistics Form, and the W9 along with your proposed bid.

Bids must be received no later than **11:00 a.m., Friday, August 14, 2015.**

Email your bid to hmwilliams@urbanaininois.us or mail your bid to:

City of Urbana
Attn: Heather Williams
400 S. Vine St
Urbana, IL 61801

If you should have questions about this request, please call me at (217) 384-2350.

Sincerely,

Heather Williams
Account Clerk II

INSTRUCTIONS TO OFFICE SUPPLY VENDORS

1. The City is exempt from all state and federal taxes. Tax Exempt #9998-5713-07.
2. The City of Urbana reserves the right to reject any or all proposals, or any part thereof, or to accept any proposal or any part thereof, or to waive any information in any proposal, deemed to be for the best interest of the City of Urbana.
3. The vendor will be required to sign the City of Urbana Purchasing Certification Form. This form states that the vendor agrees to comply with the City of Urbana's Drug-Free Workplace Act (required by Illinois Revised Statutes, Chapter 127, Section 132.311), Certification of Compliance (required by Illinois Revised Statutes, Chapter 38, Section 33-E and 34-E and Chapter 24, Section 11-42.1-1), Delinquent Taxpayers Act (required by 65 Il CS, 5/11-41.1-1) and the City of Urbana's Affirmative Action Ordinance and may be required to submit written evidence of the firm's employment practices, policies, goals, and statistical data concerning employee composition on race, color, job description and compensation.
4. The items purchased must be delivered inside to the ordering Department in the Urbana City Building, 400 South Vine, Urbana, Illinois 61801.
5. The cost of delivery to the Urbana City Building must be included in the bid.
6. Failure to fulfill the terms and conditions specified could result in the City of Urbana's refusal to accept the order and/or the vendor to be declared non-responsive/responsible for future bids.

Item Number	Items	Vendor	Item Number1	UOM	Qty Ordered
WES3129	#10 Window Env. W/Side Seam	WES	3129	BX	9
MMF2310319W06	BAG,SILVER,CLOTH,12X19	MMF	2310319W06	EA	20
UNV20701	BINDER,VIEW,11X8.5,.5",BLK	UNV	20701	EA	12
UNV20961	BINDER,VIEW,11X8.5,1",BLK	UNV	20961	EA	12
UNV20971	BINDER,VIEW,11X8.5,1.5",BLK	UNV	20971	EA	12
AVE17011	BINDER,VIEW,3RG,DRBL,1",BLK	AVE	17011	EA	6
AVE17011	BINDER,VIEW,3RG,DRBL,1",BLK	AVE	17011	EA	6
AVE17014	BINDER,VIEW,3RG,DRBL,1",BLU	AVE	17014	EA	12
AVE05725	BINDER,VIEW,3RG,ECON,1.5",BLK	AVE	05725	EA	6
WLJ36313B	BINDER,VW,R-RG,.5",N/SP,BLK	WLJ	36313B	EA	12
WLJ36234W	BINDER,VW,R-RG,1.5",WH	WLJ	36234W	EA	5
MEA45354	BOOK,MEMO,SPIRAL,3X5,60CT	MEA	45354	EA	60
MEA45354	BOOK,MEMO,SPIRAL,3X5,60CT	MEA	45354	EA	12
TOP74688	BOOK,STENO,6X9,GRG,RECY,80SH	TOP	74688	EA	5
TOP74688	BOOK,STENO,6X9,GRG,RECY,80SH	TOP	74688	EA	5
UNV86920	BOOK,STENO,GREGG,GRN,80SH	UNV	86920	EA	6
UNV86920	BOOK,STENO,GREGG,GRN,80SH	UNV	86920	EA	24
UNV86920	BOOK,STENO,GREGG,GRN,80SH	UNV	86920	EA	12
UNV86920	BOOK,STENO,GREGG,GRN,80SH	UNV	86920	EA	24
TOP25774	BOOK,STENO,GRG,6X9,RECY,WHT	TOP	25774	EA	6
ESS25774	BOOK,STENO,GRG,6X9,RECY,WHT	ESS	25774	EA	6
AAGPM628	CALENDAR,WLL,3MO,15.5X22.75	AAG	PM628	EA	8
AAGPM1428	CALENDAR,WLL,3MO,24X36,HOR	AAG	PM1428	EA	8
AAGPM428	CALENDAR,WLL,MO,20X30,WB	AAG	PM428	EA	9
UNV47210	CARD,INDEX,RLD,3X5,WHT	UNV	47210	PK	6
UNV10199	CLIP,BINDER,15MM	UNV	10199	DZ	12
UNV10199	CLIP,BINDER,15MM	UNV	10199	DZ	5
UNV10199	CLIP,BINDER,15MM	UNV	10199	DZ	5
UNV10210	CLIP,BINDER,MED	UNV	10210	DZ	6
UNV10210	CLIP,BINDER,MED	UNV	10210	DZ	5
UNV10210	CLIP,BINDER,MED	UNV	10210	DZ	36
UNV10210	CLIP,BINDER,MED	UNV	10210	DZ	5
UNV10210	CLIP,BINDER,MED	UNV	10210	DZ	5
UNV10200	CLIP,BINDER,SMALL	UNV	10200	DZ	12
UNV10200	CLIP,BINDER,SMALL	UNV	10200	DZ	5
UNV10200	CLIP,BINDER,SMALL	UNV	10200	DZ	5
UNV10200	CLIP,BINDER,SMALL	UNV	10200	DZ	5
UNV10200	CLIP,BINDER,SMALL	UNV	10200	DZ	12
UNV10200	CLIP,BINDER,SMALL	UNV	10200	DZ	12
UNV10200	CLIP,BINDER,SMALL	UNV	10200	DZ	5
UNV72220BX	CLIP,JUMBO,SMOOTH	UNV	72220BX	BX	5
SAU00558	CLIPBOARD,SLIMMATE II,BLK	SAU	00558	EA	5
ACC72365	CLIPS,RECYCLED,#1,100CT	ACC	72365	PK	10
ACC72525	CLIPS,RECYCLED,JUMBO,100CT	ACC	72525	PK	10
IVR37600	DRIVE,USB,4GB,2.0,RED	IVR	37600	EA	5

IVR37600	DRIVE,USB,4GB,2.0,RED	IVR	37600	EA	5
VER95102	DVD-R,4.7GB,16X,SPDL	VER	95102	PK	6
VER95102	DVD-R,4.7GB,16X,SPDL	VER	95102	PK	5
UNV35211	ENVELOPE,#10,4X9,WIN,WHT	UNV	35211	BX	6
SMD89544	ENVELOPE,POLY,LTR,S/B,TL,PUR	SMD	89544	PK	12
QUACO140	ENVELOPE,SEC,#6.75,24#,GRS,WW	QUA	CO140	BX	14
UNV99005	FLAG,PAGE,1X1.77",YEL	UNV	99005	PK	6
PAP5640115	FLUID,COR,FAST DRY,22ML,WHT	PAP	5640115	EA	10
PAP5640115	FLUID,COR,FAST DRY,22ML,WHT	PAP	5640115	EA	12
UNV26821	HOLDER REFL,CARD,W/TABS	UNV	26821	PK	5
DTM87225	HOLDER,CARD,BUS,DESK,7RNG	DTM	87225	PK	10
IVR39403	HOLDER,CD/DVD,SGL	IVR	39403	PK	9
IVR39403	HOLDER,CD/DVD,SGL	IVR	39403	PK	23
SAF4225BL	HOOK,COAT,PANEL,BK	SAF	4225BL	EA	6
AVE11122	INDEX,5TAB,INSRT,BIG TAB,CLR	AVE	11122	ST	10
AVE11110	INDEX,5TAB,INSRT,BIG TAB,CLR	AVE	11110	ST	6
AVE11110	INDEX,5TAB,INSRT,BIG TAB,CLR	AVE	11110	ST	15
AVE11109	INDEX,5TAB,INSRT,BIG TAB,COL	AVE	11109	ST	6
AVE11109	INDEX,5TAB,INSRT,BIG TAB,COL	AVE	11109	ST	15
AVE23281	INDEX,5TAB,L/I,COP RFD,CLR	AVE	23281	ST	10
AVE11112	INDEX,8TAB,INSRT,BIG TAB,CLR	AVE	11112	ST	24
AVE11111	INDEX,8TAB,INSRT,BIG TAB,COL	AVE	11111	ST	12
UNV20812	INDEX,BINDER,LTR,A-Z	UNV	20812	ST	5
SMD89506	JACKET,SLASH,2PKT,LTR,POLY,CLR	SMD	89506	PK	20
SAN84074	MARKER,DE,EXPO,FN,4COL	SAN	84074	ST	5
SAN30001	MARKER,PERM,SHARPIE,FN,BLK	SAN	30001	EA	12
SAN30001	MARKER,PERM,SHARPIE,FN,BLK	SAN	30001	EA	24
SAN30001	MARKER,PERM,SHARPIE,FN,BLK	SAN	30001	EA	12
WES3129-UC	NO.10, 24# WINDOW W/SIDE SEAM	WES	3129-UC	BX	8
WES3129-UC	NO.10, 24# WINDOW W/SIDE SEAM	WES	3129-UC	BX	6
RED31120	NOTEBOOK,MEMO,WBT,3X5,NR,60SH	RED	31120	EA	72
RED31120	NOTEBOOK,MEMO,WBT,3X5,NR,60SH	RED	31120	EA	72
RED31120	NOTEBOOK,MEMO,WBT,3X5,NR,60SH	RED	31120	EA	72
RED31120	NOTEBOOK,MEMO,WBT,3X5,NR,60SH	RED	31120	EA	72
RED31120	NOTEBOOK,MEMO,WBT,3X5,NR,60SH	RED	31120	EA	72
RED31120	NOTEBOOK,MEMO,WBT,3X5,NR,60SH	RED	31120	EA	72
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	10
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	12
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	10
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	15
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	15
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	7

UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	10
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	10
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	8
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	6
UNV20030	PAPER,8.5X11,RECY,20#,WHT	UNV	20030	CT	6
HAM86750	PAPER,MLT-USE,11X17,20#,RECY	HAM	86750	RM	5
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	10
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	15
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	15
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	10
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	15
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	5
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	5
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	10
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	10
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	6
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	8
CAS054901	PAPER,MULT,RECY,8.5X11,WHT	CAS	054901	CT	5
BICSCSM11BK	PEN,BP,RTR,SFT FEEL,MED,BLK	BIC	SCSM11BK	DZ	6
BICSCSM11BK	PEN,BP,RTR,SFT FEEL,MED,BLK	BIC	SCSM11BK	DZ	6
BICSCSM11BK	PEN,BP,RTR,SFT FEEL,MED,BLK	BIC	SCSM11BK	DZ	6
BICSCSM11BK	PEN,BP,RTR,SFT FEEL,MED,BLK	BIC	SCSM11BK	DZ	6
BICSCSM11BK	PEN,BP,RTR,SFT FEEL,MED,BLK	BIC	SCSM11BK	DZ	10
PAP3331131	PEN,BP,STK,W BROS,MED,BLK	PAP	3331131	DZ	6
PAP3311131	PEN,BP,STK,W BROS,MED,BLU	PAP	3311131	DZ	6
PIL28901	PEN,GEL,PRECS GRP,PR1,BLD,BLK	PIL	28901	EA	12
PENBLN77C	PEN,GEL,RTR,ENERGL DLX,MED,BLU	PEN	BLN77C	EA	10
PENBLN77C	PEN,GEL,RTR,ENERGL DLX,MED,BLU	PEN	BLN77C	EA	12
UNV39711	PEN,GEL,RTR,MED,BLU	UNV	39711	DZ	7
SAN33950	PEN,GEL,RTR,UB 207,MED,BLK	SAN	33950	DZ	8
PAP8430152	PEN,PP,FLAIR,MED,BLK	PAP	8430152	EA	12
BICMP11	PENCIL,MECH,.7MM,BLK	BIC	MP11	DZ	5
TAB58385	PROTECTOR,LABEL,3.5X2,CLR	TAB	58385	PK	5
UNV00700	REMOVER,STAPLE	UNV	00700	EA	5
DPSR2866	RIBBON,ERC,F/SMR REG 200,PUR	DPS	R2866	EA	5
DPSR2866	RIBBON,ERC,F/SMR REG 200,PUR	DPS	R2866	EA	6
GOJ190302CT	SANITIZER,HAND,PURELL,LTX	GOJ	190302CT	CT	5
AVE05247	SEAL,MAIL,1"D,PRT/WO,WHT	AVE	05247	PK	9
SWI35108	STAPLES,STD,SF1	SWI	35108	BX	10
SWI35450	STAPLES,STD,SPDPT,SF4	SWI	35450	BX	6
SWI35450	STAPLES,STD,SPDPT,SF4	SWI	35450	BX	6
BICWOTAPP11	TAPE,COR,WITE-OUT	BIC	WOTAPP11	EA	12
ROGUNITED	THE 2015 BIG BOOK-LINED OUT	ROG	UNITED	Undefined	12

PAG35038BX	TISSUE,PUFFS,FACIAL,WH	PAG	35038BX	BX	5
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**CITY OF URBANA, ILLINOIS
PURCHASING CERTIFICATION FORM (Rev. 4/06)**

The City of Urbana requires all vendors doing business at the above levels with the City to comply with certain local, state and federal requirements. By signing below, the vendor certifies, that they are familiar with and are in compliance with all of the legislative acts summarized below. False certification on this form, or the failure to fully comply with all of the requirements of these acts, may result in the termination of any contract, debarment from future contacts from either the City of Urbana, State of Illinois or any other governmental agency, and may subject the vendor to other legal actions.

DRUG FREE WORKPLACE ACT: An act to create a drug free workplace and prevent the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance by anyone while involved in the performance of a contract for the City of Urbana. (30 ILCS 580/1 et. seq.)

CERTIFICATION OF COMPLIANCE: An act to insure that all contracts for goods, services or construction are obtained only through an independent noncollusive submission of offers, the vendor must certify that it is not barred from contracting with any unit of the State of Illinois or any Illinois local governmental agency as a result of any bid-rigging or bid-rotating. (720 ILCS 5/33E 1 et. seq.)

DELINQUENT TAXPAYERS: An act to certify that any vendors doing business with the City of Urbana are not delinquent in the payment of any tax administered by the Illinois Department of Revenue. (65 ILCS 5/11-42.1-1)

SIGNATURES (COMPLETE APPROPRIATE SECTION)

INDIVIDUAL **PARTNERSHIP** **CORPORATION** (check one)

Name of the Business _____

Signed By: _____

Printed Name: _____

Business Address: _____

Business Phone Number: _____

Date _____



Illinois Department of Revenue

Office of Local Government Services
Sales Tax Exemption Section, 3-520
101 W. Jefferson Street
Springfield, IL 62702
217 782-8881

January 2, 2015

CITY OF URBANA
ELIZABETH HANNAN, FINANCE DIR
400 SOUTH VINE
URBANA IL 61801

Effective January 1, 2015, we have renewed your governmental exemption from payment of the Retailers' Occupation Tax, the Service Occupation Tax (both state and local), the Use Tax, and the Service Use Tax, as required by Illinois law.

We have issued the following new tax exemption identification number:

E9998-5713-07
to
CITY OF URBANA
of
URBANA, IL

The terms and conditions governing use of your exemption number remain unchanged.

Office of Local Government Services
Illinois Department of Revenue

<p align="center"> CITY OF URBANA HUMAN RELATIONS DIVISION 400 SOUTH VINE ST. URBANA, ILLINOIS 61801 (217) 384-2466 (phone); 384-2426 (fax) terent@city.urbana.il.us </p>	Office Use Only (05/13)	
	Requested by:	Date:
	Approved by:	Date:
	Certification	
	Date:	
Certificate Expiration Date:		

EQUAL EMPLOYMENT OPPORTUNITY (E.E.O.) WORKFORCE STATISTICS FORM

Please complete the sections below as instructed. Failure to properly complete this form may result in a delay or denial of eligibility to bid or do business with the City of Urbana.

Section I. Identification

1. Company Name and Address:

Name:

d/b/a:

Address:

City/State/Zip:

Telephone Number(s) include area code:

Check one of the following

Corporation	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Individual Proprietorship	<input type="checkbox"/>	Limited Liability Corp.	<input type="checkbox"/>
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FEI Number:	<input type="text"/>	Social Security Number:	<input type="text"/>
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2. Name and Address of the Company's Principal Office *(answer only if not the same as above)*

Name:

Address:

City/State/Zip

3. Major activity of your company (product or service):

4. Project on which your company is bidding:

5. City of Urbana contact staff assigned to contract:

SECTION II. Policies and Practices

Description of EEO Policies and Practices		YES	NO
A.	Is it the Company's policy to recruit, hire, train, upgrade, promote and discipline persons without regard to race, color, creed, class, national origin, religion, sex, age, marital status, mental and/or physical disability, personal appearance, sexual preference, family responsibilities, matriculation, political affiliation, prior arrest, conviction record, or source of income ?		
B.	Has someone been assigned to develop procedures, which will assure that the EEO policy is implemented and enforced by managerial, administrative, and supervisory personnel? If so, please indicate the name and title of the official charged with this responsibility. Name: _____ Title: _____ Telephone: _____ Email: _____		
C.	Does the company have a written Equal Employment Opportunity plan or statement? Note: If no, a copy of an E.E.O statement is enclosed. You must attach an EEO Statement in order to be considered eligible to do business with the City of Urbana. Questions? (217) 384-2466 or terent@city.urbana.il.us.		
D.	Has the company developed a written policy statement prohibiting Sexual Harassment? You must attach a copy of your company's Sexual Harassment Policy in order to be considered eligible to do business with the City of Urbana.		
E.	Have all recruitment sources been notified that the company will consider all qualified applicants without regard to race, color, creed, class, national origin, religion, sex, age, marital status, mental and/or physical disability, personal appearance, sexual orientation, family responsibilities, matriculation, political affiliation, prior arrest, conviction record, or source of income?		
F.	If advertising is used, does it specify that all qualified applicants will be considered for employment without regard to race, color, creed, class, national origin, religion, sex, age, marital status, mental and/or physical disability, personal appearance, sexual orientation, family responsibilities, matriculation, political affiliation, prior arrest, conviction record, or source of income?		
G.	Has the contractor notified all of its sub-contractors of their obligations to comply with the Equal Opportunity requirements either in writing, by inclusion in subcontracts or purchase orders?		
H.	Is the company a state certified minority/women owned business? If yes, please attach a copy of state certification.		
I.	Does the company have collective bargaining agreements with labor organizations?		
J.	Have the labor organizations been notified of the company's responsibility to comply with the Equal Employment Opportunity requirements in all contracts with the City of Urbana?		
K.	Does your company perform construction, rehabilitation, alteration, conversion, demolition or repair of buildings, highways or other improvements to real property? (If yes, please complete Table B.)		
L.	Are you currently seeking to renew an existing or expired Urbana EEO certification? (If yes, you need to complete Table C.)		

SECTION III. Employment Information

Please complete the company work force analysis on the bottom of this page. Use the number of employees as of the most recent payroll period. **You must complete this form in its entirety, as instructed and submit your organization's (1) EEO Statement and (2) Sexual Harassment Policy in order to be eligible to do business with the City of Urbana. For detailed descriptions of the Job Classifications see attached descriptions.** If minorities and females are currently underrepresented in your workforce, please attach a copy of an explanation of your plan to recruit and hire qualified minorities and females.

TABLE A – TOTAL CONTRACTOR/VENDOR WORKFORCE

Job Categories	Overall Totals		White (Not of Hispanic Origin)		Black or African-American (Not of Hispanic Origin)		Hispanic or Latino		Asian or Pacific Islander		American Indian or Alaskan Native	
	M	F	M	F	M	F	M	F	M	F	M	F
Officials & Mgrs												
Professionals												
Technicians												
Sales Workers												
Office & Clerical												
Craft Workers (Skilled)												
Operatives (Semi-Skilled)												
Laborers (Unskilled)												
Service Workers												
TOTAL												
M = MALE, Column B is sum of Rows D, F, H, J and L.												
F = FEMALE, Column C is sum of Rows E, G, I, K and M.												
Date of above Data: _____												

TABLE B* – EMPLOYEES TO BE ASSIGNED TO CITY OF URBANA CONTRACT

Job Categories	TOTAL EMPLOYEES		BLACK EMPLOYEES		HISPANIC EMPLOYEES		OTHER MINORITY EMPLOYEES	
	M	F	M	F	M	F	M	F
Officials & Mgrs								
Professionals								
Technicians								
Sales Workers								
Office & Clerical								
Craft Workers (Skilled)								
Operatives (Semi-Skilled)								
Laborers (Unskilled)								
Service Workers								
TOTAL								

*Totals included under Table B should be a projection of numbers of persons to be employed in the performance of the City contract.

For Contractors:

Data provided in Table B will be verified by worksite inspections.

TABLE C WORKFORCE TURNOVER SINCE PREVIOUS EEO REPORT**

Job Categories	TOTAL EMPLOYEES SEPARATED		MINORITY EMPLOYEES SEPARATED		TOTAL EMPLOYEES HIRED		MINORITY EMPLOYEES HIRED	
	M	F	M	F	M	F	M	F
Officials & Mgrs								
Professionals								
Technicians								
Sales Workers								
Office & Clerical								
Craft Workers (Skilled)								
Operatives (Semi-Skilled)								
Laborers (Unskilled)								
Service Workers								
TOTAL								

SECTION IV. Certification

By signing below, the company certifies that it has answered all of the foregoing questions truthfully to the best of its knowledge and belief and agrees that it/he/she will comply and abide by the City of Urbana's Code of Ordinances (Section 2-119).

Signature

Typed Name and Title

Date

SECTION V. Verification

Prior to submitting this form, please check the answers to the following questions to verify your completion of this form:

1. **Did you fill in all of the appropriate boxes in the table in Section III, including the "TOTAL" row?**

YES _____

NO _____

2. **Have you enclosed your company's EEO statement?**

YES _____

NO _____

3. **Have you enclosed your company's Sexual Harassment policy?**

YES _____

NO _____

DEFINITIONS OF TERMS LISTED ON THE WORKFORCE STATISTICS FORM

(See previous Page)

DESCRIPTION OF RACE/ETHNIC CATEGORIES

Race /ethnic designations as used by the Department do not denote scientific definitions of anthropological origins. For the purposes of this report, an employee may be included in the group to which he or she appears to belong, identifies with, or is regarded in the community as belonging. However, no person should be counted in more than *one* race/ethnic group. The race/ethnic categories for this report are:

White (Not of Hispanic origin). All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Black of African-American (Not of Hispanic origin). All persons having origins in any of the Black racial groups of Africa.

Hispanic or Latino. All persons of Mexican, Puerto Rican, Cuban, Central of South American, or other Spanish culture or origin, regardless of race.

Asian or Pacific Islander. All persons having origins any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands and Samoa.

American Indian or Alaskan Native. All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

DESCRIPTION OF JOB CATEGORIES

Each employee should be counted in only one job category. Select the category containing the jobs most similar to that performed by the employee. The jobs listed in each category are intended to provide an example, not a complete list, of all job titles falling into that category.

Officials and managers. Occupations requiring administrative and managerial personnel who set broad policies, exercise overall responsibility for execution of these policies, and direct individual departments or special phases of firm's operations. Includes: officials, executives, middle management, plant managers, department managers, and superintendents, salaried supervisors who are members of management, purchasing agents and buyers, railroad conductors and yard masters, ship captains, mates and other officers farm operators and managers, and kindred workers.

Professionals. Occupations requiring either college graduation or experience of such kind and amount as to provide a comparable background. Includes: accountants and auditors, airplane pilots and navigators, architects, artists, chemists, designers, dietitians, editors, engineers, layers, librarians, mathematicians, natural scientist, registered professional nurses, personnel and labor relations specialist, physical scientist, physicians, social scientist, teachers, surveyors and kindred workers.

Technicians. Occupations requiring a combination of basic scientific knowledge and manual skill which can be obtained through 2 years of post high school education, such as is offered in many technical institutes and union colleges, or through equivalent on-the-job training. Include: computer programmers, drafters, engineering aides, junior engineers, mathematical aides, licensed, practical or vocational nurses, photographers, radio operators, scientific assistants, technical illustrators, technicians (medical, dental, electronic, physical science), and kindred workers.

Sales. Occupations engaging wholly or primarily in direct selling. Includes: advertising agents and sales workers, insurance agents and brokers, real estate agents, and brokers, stock and bond sales workers, demonstrators, sales workers and sales clerks, grocery clerks, and cashiers/checkers, and kindred workers.

Office and clerical. Includes all clerical-type work regardless of level of difficulty, where the activities are predominantly non manual though some manual work not directly involved with altering or transporting the products is included. Includes: bookkeepers, collectors (bills and accounts), messengers and office helpers, office machine operators (including computer), shipping and receiving clerks, stenographers, typists and secretaries, telegraph and telephone operators, legal assistants, and kindred workers.

Craft workers (skilled). Manual workers of relatively high skill level having a thorough and comprehensive knowledge of the processes involved in their work. Exercise considerable independent judgment and usually receive an extensive period of training. Includes: the building trades, hourly paid supervisors and lead operators who are not members of occupations, compositors and typesetters, electricians, engravers, painters (construction and maintenance), motion picture projectionists, pattern and model makers, stationary hand painters, coaters, bakers, decorating occupations, and kindred workers.

Operatives (semiskilled). Workers who operate machine or processing equipment or perform other factory-type duties of intermediate skill level which can be mastered in a few weeks and require only limited training. Includes: apprentices (auto service and stitchers, dryers, furnace workers, heaters, laundry and dry cleaning operatives, milliners, mine operatives and laborers, motor operators, oilers and greasers (except auto), painters (manufactured articles), photographic process workers, truck and tractor drivers, knitting, looping, taping and weaving machine operators, welders and flame cutters, electrical and electronic equipment assemblers, butchers and meatcutters, inspectors, testers and graders, handpackers and packagers, and kindred workers.

Laborers (unskilled). Workers in manual occupations which generally require no special training who perform elementary duties that may be learned in a few days and require the application of little or no independent judgment. Includes: garage laborers, car washers and greasers, groundskeepers and gardeners, farmworkers, stevedores, wood choppers, laborers performing lifting, digging, mixing, loading and pulling operation and kindred workers.

Service workers. Workers in both protective and nonprotective service occupations. Includes: Attendants (hospital and other institutions, professional and personal service, including nurses aides, and orderlies), barbers, charworkers and cleaners, cooks, counter and fountain workers, elevator operators, firefighters and fire protection, guards, doorkeepers, stewards, janitors, police officers and detectives, porters, waiters and waitresses, amusement and recreation facilities attendants, guides, ushers, public transportation attendants, and kindred workers.

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your 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). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								
				-			-	

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number								
				-				

Part II Certification

Under penalties of perjury, I certify that:

1. 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
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 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 or other U.S. person (defined below).

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, 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. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the “Name” line. You may enter your business, trade, or “doing business as (DBA)” name on the “Business name/disregarded entity name” line.

Partnership, C Corporation, or S Corporation. Enter the entity’s name on the “Name” line and any business, trade, or “doing business as (DBA) name” on the “Business name/disregarded entity name” line.

Disregarded entity. Enter the owner’s name on the “Name” line. The name of the entity entered on the “Name” line should never be a disregarded entity. The name on the “Name” line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner’s name is required to be provided on the “Name” line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on the “Business name/disregarded entity name” line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the “Name” line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the “Name” line is an LLC, check the “Limited liability company” box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter “P” for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter “C” for C corporation or “S” for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the “Name” line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the “Name” line.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 7 ²

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ⁴
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.