W-9A ATTACHMENT TO FORM W-9
Tax Treaty Claim By A US Person

Submit (along with W9) to:
Financial Services
Payroll Department
6054 S. Drexel Ave. Suite 300
Chicago, IL  60637

Note: This form is to be filled out by the Taxpayer and is used with the IRS Form W-9, Request for Taxpayer Identification Number and Certification.

TAXPAYER INFORMATION & RESIDENT STATUS

Taxpayer Name: __________________________________________

__________________________

Taxpayer is a:
☐ US Citizen
☐ US Resident Alien
☐ Other

Taxpayer US Identification Number (TIN):

___ ___ ___  ____  ____  ____  ____  _____  ____  ____

If you are a US Resident Alien, are you a resident alien under (check one):
☐ The Green Card Test
☐ The Substantial Presence Test
☐ The Residency Article of a Tax Treaty (Barbados TAC 20, Hungary TAC 18, Jamaica TAC 21, Malta TAC 22)

TAXPAYER TREATY INFORMATION

Taxpayer is claiming a benefit or exclusion under which tax treaty?

TRINIDAD & TOBAGO

Country Name

Under which treaty article(s) is the taxpayer claiming a benefit or exclusion?* 18

Tax Treaty Article No.

Is the taxpayer relying upon an exception to the saving clause of his tax treaty in order to claim the benefit or exclusion? ☒ YES ☐ NO

Describe the tax treaty benefit or exclusion the taxpayer is claiming:

Savings Clause  3(3) Exception to the Savings Clause  3(4)

Please sign here to certify that the above information is correct.____________________________________