

SELECT ORGANIZATION TYPE:

SUB OBJECT CODE

Required Information (Check one box only)

- 1862 Land-Grant College LG
- 1890 Land-Grant College HB
- Cooperative Extension Service CO
- Female Owned FO
- Hispanic Institution HI
- Individual IN
- Minority Owned MO
- Other OT
- Other Federal Research FR
- Private for Profit PP
- Private Non-Profit PN
- Private University or College PR
- Public University or College PU
- Small Business SB
- State Agricultural Research Station SA
- State or Local Government SL
- Veterinary School or College VE

The following additional information is required:

- Dunn and Bradstreet Universal Numbering System (DUNS) _____
- Tax Identification Number (TIN) _____
- EIN _____
- Authorized Organizational Representative E-Mail Address _____
- Principal Investigator E-Mail Address _____

Transactions with Corporations

Check One: Cooperator _____ is _____ is not an entity which has filed articles of incorporation in one of the fifty states, the District of Columbia, or any of the territories of the United States of America.

If "is" has been checked, completion of the following representation is required.

By signing below the undersigned attests that _____ [insert corporation name] has not been convicted of a felony criminal violation under Federal or State law within the past 24 months preceding the date of signature, nor has any officer or agent of _____ [insert corporation name] been convicted of a felony criminal violation under Federal or State law in the past 24 months preceding the date of signature.

By signing below the undersigned attests that _____ [insert corporation name] does not have any unpaid Federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability.

Signature: _____ Date: _____

Printed Name & Title _____