

Salem Metal, Inc.
CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Company name: MASSACHUSETTS INSTITUTE OF TECHNOLOGY (MIT)
Company address: 77 MASSACHUSETTS AVE
City: CAMBRIDGE State: MA ZIP Code: 02139
Phone: (617) 253-1000 Fax: _____ Email: _____
Federal ID# 04-2103594 Duns # _____
A/P Contact: John Larkin Phone: (617) 253-2729 Email: j.larkin@mit.edu
Date business commenced: 1861
Sole proprietorship: _____ Partnership: _____ Corporation: _____ Other: 501(c)(3)

BANK INFORMATION

Bank name: BANK OF AMERICA
Bank address: _____
City: _____ State: _____ ZIP Code: _____
Phone: _____ Fax: _____ E-mail: _____
Bank contact: _____
Type of account: _____ Account number: (see attached)
Savings _____
Checking _____
Other _____

BUSINESS/TRADE REFERENCES

Company name: _____
Address: _____
City: _____ State: _____ ZIP Code: _____
Contact: _____ Phone: _____ E-mail: _____

Company name: _____
Address: _____
City: _____ State: _____ ZIP Code: _____
Contact: _____ Phone: _____ E-mail: _____

Company name: _____
Address: _____
City: _____ State: _____ ZIP Code: _____
Contact: _____ Phone: _____ E-mail: _____

AGREEMENT

1. All invoices are to be paid 1%10/Net 30 days from the date of the invoice, unless otherwise agreed upon in writing.
2. Claims arising from invoices must be made within fourteen working days.
3. By submitting this application, you authorize Salem Metal, Inc. to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURE

Signature: John P Larkin
Title: Asst Manager

Date: 6/18/2018

Request for Taxpayer Identification Number and Certification

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

► Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Massachusetts Institute of Technology

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☒ Other (see instructions) ►

Tax Exempt Entity Under IRC Section 501(c)(3)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) **1**

Exemption from FATCA reporting code (if any) **A**

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

77 Massachusetts Avenue

6 City, state, and ZIP code

Cambridge, MA 02139

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

 - -

or

Employer identification number

0 4 - 2 1 0 3 5 9 4

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA 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, 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 for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ►

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

MIT BANK and TRADE REFERENCE INFORMATION

Massachusetts Institute of Technology
77 Massachusetts Avenue
Cambridge, MA 02139
(617) 253-1000

TRADE REFERENCE

Airgas, Inc.
6055 Rockside Woods Blvd.
Independence, OH 44131
Contact: Mary.Neric@Airgas.com

OT & T Travel
890 Winter Street
Waltham, MA 02451
Contact: Joseph Tse
Tel: (781) 890-9000
Fax: (781) 890-2100

Red Thread
22 Boston Wharf Road
Boston, MA 02110
Contact: Rita Fino
Email all Requests to:
rfino@red-thread.com

BANK REFERENCE

Bank of America – Acct # Ending 63306

Please see:
<http://www.bankvod.com>
(All references processed online)
Questions about website: 1-888-801-0091

CONTACTS

ACCOUNTING:
John Larkin @ (617) 253-2729

PROCUREMENT:
Gerry O'Toole @ (617) 253-6067

BILLING /REMIT TO ADDRESS

Massachusetts Institute of Technology
P.O. Box 9169
Cambridge, MA 02139-9169

BUSINESS TYPE – Non-Profit Educational Institution
ESTABLISHED/INCORPORATED – 1861
RELOCATED TO CAMBRIDGE - 1916
NUMBER OF EMPLOYEES – 10,000+
FEDERAL I.D. NUMBER: 04-2103594
MASSACHUSETTS TAX EXEMPT NUMBER – E 042-103-594
D&B NUMBER – 00-142-5594
D&B RATING – ER 1



Form ST-5
Sales Tax Exempt
Purchaser Certificate

Rev. 6/09

Massachusetts
Department of
Revenue

Part 1. Exempt taxpayer information. To be completed by exempt government or 501(c)(3) organization.

Name	Massachusetts Institute of Technology		
Address	77 Massachusetts Avenue		
City	Cambridge	State MA	Zip 02139
Exemption number	042-103-594		
Issue date	10/16/14	Date of expiration of certificate 10/16/24	

Certification is hereby made that the organization named above is an exempt purchaser under Massachusetts General Laws, Chapter 64H, sections 6(d) or 6(e). All purchases of tangible personal property or services by this organization are exempt from taxation under said chapter to the extent that such property or services are used in the conduct of the business of the purchaser. Any abuse or misuse of this certificate by any tax-exempt organization or any unauthorized use of this certificate by any individual constitutes a serious violation and will lead to revocation.

Signature		Title	Director of Financial Operations	Date	2/7/2018
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Warning: Willful misuse of this certificate may result in criminal tax evasion sanctions of up to one year in prison and \$10,000 (\$50,000 for corporations) in fines.

Part 2. Agent information. To be completed by agent of exempt government or 501(c)(3) organization.

Name of agent's organization			
Address			
City		State	Zip
Agent's name			
Address			
City		State	Zip

I certify that in making this purchase, I am acting as an agent for the exempt organization named above (select one):

- ☐ Government organization (local public school, city/town government, state agency, etc.).
Attach Form ST-2, if available. If Form ST-2 is not available, enter exemption number, if known: _____
- ☒ 501(c)(3) organization (parochial school, Scout troop, etc.). Form ST-2 must be attached.

Signature	Title	Date

Part 3. Vendor information

Vendor's name

Check applicable box:

- ☐ Single purchase certificate (attach detailed receipts or complete Part 4, on reverse)
- ☒ Blanket certificate



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF REVENUE
PO BOX 7010
BOSTON, MA 02204



MASSACHUSETTS INSTITUTE OF
TECHNOLOGY
77 MASSACHUSETTS AVE # NE49-3142
CAMBRIDGE, MA 02139-4307

4030

Notice Date: 10/10/14

Taxpayer ID Number: 042 103 594

Dear Taxpayer,

Below please find your Certificate of Exemption (Form ST-2). Please cut along the dotted line and display at your place of business.

Sincerely,

Massachusetts Dept. of Revenue



**Form ST-2
Certificate of Exemption**

**Massachusetts
Department of
Revenue**

Certification is hereby made that the organization herein is an exempt purchaser under General Laws, Chapter 64H, section 6(d) or (e). All purchases of tangible personal property by this organization are exempt from taxation under said chapter to the extent that such property is used in the conduct of the business of the purchaser. Any abuse or misuse of this certificate by any tax-exempt organization or any unauthorized use of this certificate by any individual constitutes a serious violation and will lead to revocation. Willful misuse of this Certificate of Exemption is subject to criminal sanctions of up to one year in prison and \$10,000 (\$50,000 for corporations) in fines.

**MASSACHUSETTS INSTITUTE OF
TECHNOLOGY
77 MASS AVE #NE49-3142
CAMBRIDGE MA 02139**

**EXEMPTION NUMBER
042 103 594
ISSUE DATE
10/16/14
CERTIFICATE EXPIRES ON
10/16/24**

NOT ASSIGNABLE OR TRANSFERABLE

COMMISSIONER OF REVENUE

ST-2