



INDIANA UNIVERSITY

OFFICE OF FINANCIAL MANAGEMENT SERVICES

Prize Tax Data Collection Form

This form is to be completed by the department that has performed a drawing or “game of chance” and provided a prize to a recipient. This information is necessary to assist the university in meeting federal and state tax reporting obligations. An IRS Form W-9 or Form W-8BEN are also required to be submitted with this document unless the prize recipient is an employee of the university.

Event Information: _____
Event Name *Event Date*

Recipient Legal Name: _____
Last Name *First Name*

IRS Tax Form Collected: W-9 W-8BEN University ID#

Date prize distributed: _____ Value of prize (attach support): \$ _____

Description of prize: _____

Purpose of event and prize distribution: _____

How did participants become eligible for the drawing or game of chance?
_____ Voluntary submission of idea, essay, art, or completion of survey for a contest
_____ Randomly selected from participants engaged in an activity or in attendance at an event

Eligible Participants (Mark all that apply): Student Faculty/Staff General Public

Department Information: _____
Chart/Org *Contact Name/Number*

Internal Tax Department Use Only:
Date Received: _____ Reviewed by: _____
Comments: _____

