## **Mount Vernon School District**

# **Personal Services Contract Instructions**

An individual who is contracted for personal services CAN NOT be an employee of the Mount Vernon School District in any capacity, which includes being on the substitute list. Please verify before you complete the paperwork that they are not an employee.

An individual who is contracted for personal services CAN NOT be told <u>WHAT</u> or <u>HOW</u> to provide the service.

The amount listed on the personal service contract and the purchase order is to be listed as a TOTAL amount for services. Do not break down expenses, but do note that expenses are reimbursable.

In order to process a personal service contract, the following forms must be completed **PRIOR TO SERVICES BEING RENDERED**:

- Personal Services Contract
- Request for approval of Independent Contractor
  - Completed by the individual
  - School or Department completes portion of form as noted
- Purchase Order
- DRS Form
- W-9 Form (Only if new vendor)
- Fingerprint Card (if having unsupervised access to children)
- Sexual Misconduct Disclosure Release Form (if having unsupervised access to children)

Personal service contracts are required for any individual that provides workshops, assemblies, interpretation services, training, consulting, speaking engagements, or any other service.

\*\*An invoice, with the PO number referenced, will need to be issued by the individual providing the service to Accounts Payable in order for payment to be issued. \*\*

Mount '	Vernon	School	District	No.	320
MOUIL	A GLI LIOLI	<b>SCHOOL</b>	DISHILL	TIU.	320

Purchase Order #	
Account Code:	

# **CONTRACT FOR SERVICES**

Contract Dates: Be	eginning and Ending:		
Payment is to be made at the fol	lowing rate:	and WILL/WILL NOT included reimburs	ements
for out-of-pocket expenses. A total	payment will not exce	eed \$	
THE FOLLOWING, DETAILED SERVICES ARE EXPECTED TO BE FURNISHED to the Mount Vernon School District by the undersigned individual/company representative:			
	ACCEPTANCE	OF CONTRACT	
	ACCEPTANCE	OF CONTRACT	
execution of this Agreement, that their entity or voluntarily excluded for the award of contribution, mean officers; directors; owners entity (e.g.: general manager; plant manager; provide the other(s) immediate written notice certification was erroneous when made or has this Agreement is a material representation or at any time during this Agreement, including a circumstances, it may terminate this Agreement.  The vendor shall invoice the should reference the purchase.	nor its Principals are preseracts by any Federal governry; partners; and persons have; head of subsidiary, divisione if, at any time during the secome erroneous by reason fact upon which each part any renewals hereof, that the trin accordance with the tent in accordance with the te	terms of this contract are fulfilled. All in	d ineligible, f this a business arty agrees to s that its e execution of ty determine, ged
Vendor Signature	Date	School Principal/Budget Manager Signature	Date
Vendor Name (Please print)			
Street Address/PO Box			
City, State, Zip			
Phone number			
Social Security # or Tay ID# (REGUIR)	ED)		

# **Request for Approval of Independent Contractor/Educational Consultant Status**

# **For Personal Services Providers**

# MOUNT VERNON SCHOOL DISTRICT NO. 320

This section to be completed by Contractor/Educational Consultant
Name of individual providing service (type or print):
Social Security Number:
Please check "Yes" if the following statements are true regarding your independent contractor/educational consultant status: (please note that items 1 and 2 must be checked "Yes" in order to qualify as an independent contractor/educational consultant)
The following statements are true regarding my independent contractor/educational consultant status:
I am free from the direction and control of Mount Vernon School District No. 320 as to the performance of service to be provided. Yes  No. 3. I will be providing a service which is outside the scape of duties and (or beyond the expertise of Mount Vernon).
2. I will be providing a service which is outside the scope of duties and/or beyond the expertise of Mount Vernon School District employees. Yes No
3. I am independently established in my own business and offer my services to the general public. Yes No
4. I maintain a separate set of business records and file a schedule of expenses with the Internal Revenue Service.
Yes No 5. I have registered with the Washington State Department of Revenue and other appropriate state agencies as required by Washington State Law. Yes No (If you check "No" on item 4, you must be able to chec "Yes" on items 5-7 in order to qualify as an Independent Contractor/Educational Consultant)
Washington State Unified Business Identification Number (UBI)
<ol> <li>My gross annual income in the State of Washington as an independent contractor is less than \$12,000.00.</li> <li>Yes No</li> </ol>
7. I do not sell any items at retail. Yes No
<ul><li>8. I do not repair, install, alter, decorate, clean, construct or improve any real or personal property. Yes</li><li>9. I have retired under the 2008 Early Retirement Program. Yes</li><li>No</li></ul>
Contractor/Educational Consultant Signature Date
This section to be completed by School or Department
Describe the service this independent contractor/educational consultant will provide:
Will contractor/educational consultant have unsupervised access to children? Yes No
(If "Yes", fingerprinting and a background check are required prior to contractor providing service)

**Authorizing Signature** 

Requesting School or Department

Date



# **Retirement Status Verification**

Employers can use this form to document the retirement status of all new employees.

DRS Contact Information Employer Support Services (ESS) 360.664.7200, option 2 800.547.6657, option 6, option 2 drs.employersupport@drs.wa.gov

# **Employer Instructions**

RCW 41.50.139 requires employers to obtain, in writing, the retirement status of all new employees. Your organization can document the status using your own process, or by using this form. If using this form:

- Ask the employee to complete and sign the Employee Information section below.
- Use the Member Management Process in the Employer Reporting Application (ERA) to verify the employee's retirement status.
- Record the results in the Employer Verification section below.
- Use Retiree Return to Work (RRTW) Reporting Charts to review reporting instructions as necessary.
- Sign and date this form. Retain for 60 years.

<b>Employee Information</b>			Employer
Employee Name (Last, First, Middle)	Social Security Nur	nber	Employer Verification
Are you a retiree of one of Washington state's retirement systems? If	f yes, which one(s)?		☐ Yes ☐ No
☐ Yes,	No		
If a retiree of PERS, SERS or TRS, did you retire using the 2008 early r Yes  No If yes, are you under age 65? Yes No	•	08 ERF)?	☐ Yes ☐ No
Have you retired or will you be eligible to retire from LEOFF Plan 2 in	the future?		☐ Yes ☐ No
☐ Yes ☐ No		If yes, and filling eligible position (not L2 position), have employee complete LEOFF Plan 2 Re-employment form.	
re you a retiree of a separate retirement plan covered by the city of Seattle, Spokane or Tacoma?		If the employee checked yes,	
If yes, which one(s)?  ☐ Yes, ☐ No		stop. Contact ESS before enrolling the employee in a DRS retirement plan.	
	you currently employed by another public employer and contributing to a Washington state rement system? That is, will you be working at the same time for two public employers?  Yes  No		If the employee checked yes, stop. Contact ESS before enrolling the employee in a DRS retirement plan.
mployee Signature Date		·	
Employer Comments (optional)			
Please enter any additional comments here. If you need more room, use the back of this form and check this box:			
Employer Signature			
I verified the above information using ERA (or by contacting DRS). I a result in a liability to the employer.	acknowledge that fail	ure to pro	perly report a retiree to DRS can
Employer Signature Date			





# WASHINGTON STATE SEXUAL MISCONDUCT DISCLOSURE RELEASE

FAILURE TO SIGN THIS FORM WILL PREVENT EMPLOYMENT O	OPPORTUNITIES WITH MOUNT VERNON SCHOOL DISTRICT.
Please Print	
Applicant Name (Last, First, Middle)	Former Name(s)
Prior school district employment in addition to the Mount Vernon School	District? Yes No
If you checked "no", sign and return this form to the Human Resources D	epartment.
If you answered "yes" to the above question, please list below the name a (Attach additional form(s), if necessary.) Please do not forget to sign the	
	send to the districts listed on the form.
School/District Name Address	
Position(s) Held	Dates of Employment
School/District Name Address	
Position(s) Held	Dates of Employment
School/District Name Address	
Position(s) Held	Dates of Employment
I authorize you to release to the school/district listed below, all informati made a determination that there is sufficient information to conclude the resulted in the employee's leaving his/her position at the school district. any rebuttal documents, in personnel, investigative or other files, in acco	at the abuse or misconduct occurred and that the abuse or misconduct Such information includes copies of all related documents, including
employees acting on behalf of the employer from any liability for providir	ng information described in this document.
Applicant Signature	Date
<b>→</b>	
Applicant Signature	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400).	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400). S8. Your assistance is appreciated.  No sexual misconduct materials were found.  Yes, sexual misconduct materials are being forwarded	Date  The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this Sexual misconduct definitions are found in WAC 181-87 and WAC 181-
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400). See Your assistance is appreciated.  No sexual misconduct materials were found.	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this Sexual misconduct definitions are found in WAC 181-87 and WAC 181-  Complaint of sexual misconduct
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400). Stat	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this Sexual misconduct definitions are found in WAC 181-87 and WAC 181-  Complaint of sexual misconduct
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400). See Your assistance is appreciated.  No sexual misconduct materials were found.  Yes, sexual misconduct materials are being forwarded to the requesting school district.  No record of employment	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this Sexual misconduct definitions are found in WAC 181-87 and WAC 181-  Complaint of sexual misconduct  was filed with OSPI. Yes No
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400). Stat	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this Sexual misconduct definitions are found in WAC 181-87 and WAC 181-  Complaint of sexual misconduct  was filed with OSPI. Yes No
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400). Section 88. Your assistance is appreciated.  No sexual misconduct materials were found.  Yes, sexual misconduct materials are being forwarded to the requesting school district.  No record of employment  Former Employer Signature  Title	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this Sexual misconduct definitions are found in WAC 181-87 and WAC 181-  Complaint of sexual misconduct  was filed with OSPI. Yes No
Applicant Signature  To: Human Resources Department:  The named applicant is under consideration for a position in our district. necessary in the hiring of school district employees to ensure the safety of above has had previous employment with your organization. As a former form within 20 business days as required by state law (RCW 28A.400). S8. Your assistance is appreciated.  No sexual misconduct materials were found.  Yes, sexual misconduct materials are being forwarded to the requesting school district.  No record of employment  Former Employer Signature  Title  Employing School Receipt Date  Return all completed information to:	The Legislature has determined that additional safeguards are of Washington's school children. The individual whose name appears remployer, we request you provide the information requested on this Sexual misconduct definitions are found in WAC 181-87 and WAC 181-  Complaint of sexual misconduct was filed with OSPI. Yes No  Date  Reciplent Name

Form
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest Information.

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

	1 Name (as shown on your income tax return), Name is required on this line; do	not leave this line blank.		
	2 Business name/disregarded entity name, If different from above			
и раде 3.	3 Check appropriate box for federal tax classification of the person whose name following seven boxes.  Individual/sole proprietor or C Corporation S Corporation		one of the	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
pe.	single-member LLC			Exempt payee code (if any)
Print or type. Specific Instructions on page	Limited liability company. Enter the tax classification (C=C corporation, S:  Note: Check the appropriate box in the line above for the tax classification LLC if the LLC is classified as a single-member LLC that is disregarded from the owner for U.S. federal tax principles is disregarded from the owner should check the appropriate box for the terms.	n of the single-member owner. Do not the owner unless the owner of the urposes. Otherwise, a single-member	he LLC is er LLC that	Exemption from FATCA reporting code (if any)
8	Other (see instructions) ▶			(Applies to accounts maintained outside the U.S.)
See S	5 Address (number, street, and apt. or suite no.) See instructions.	Requeste	er's name ar	nd address (optional)
o	6 City, state, and ZIP code			
	7 List account number(s) here (optional)			
Par	Taxpayer Identification Number (TIN)			
1 2 2 2	your TIN in the appropriate box. The TIN provided must match the name	e given on line 1 to avoid	Social secu	rity number
	p withholding. For individuals, this is generally your social security num		TT	
	nt alien, sole proprietor, or disregarded entity, see the instructions for F			-      <b>-</b>
	s, it is your employer identification number (EIN). If you do not have a n			
TIN, la		-	or E-player	double ration rumber
	If the account is in more than one name, see the instructions for line 1. er To Give the Requester for guidelines on whose number to enter.	Also see What Name and	Employer	dentification number
Numbe	er to give the nequester for guidelines on whose number to enter.		-	
Part		V		
Under	penalties of perjury, I certify that:			
2. I am Sen	number shown on this form is my correct taxpayer identification number not subject to backup withholding because: (a) I am exempt from backice (IRS) that I am subject to backup withholding as a result of a failure onger subject to backup withholding; and	kup withholding, or (b) I have no	ot been no	tified by the Internal Revenue
3. I am	a U.S. citizen or other U.S. person (defined below); and			
	FATCA code(s) entered on this form (if any) indicating that I am exemp	t from FATCA reporting is corre	ect.	
Certific you has acquisi	cation instructions. You must cross out item 2 above if you have been no ve failed to report all interest and dividends on your tax return. For real est ition or abandonment of secured property, cancellation of debt, contribution han interest and dividends, you are not required to sign the certification, but	tified by the IRS that you are cun ate transactions, item 2 does not ons to an individual retirement am	rently subje t apply. For angement (	mortgage interest paid, IRA), and generally, payments
Sign Here	Signature of	Bulk		
	The state of the s	Date ►	t . P	
	neral Instructions In references are to the Internal Revenue Code unless otherwise	<ul> <li>Form 1099-DIV (dividends, i funds)</li> </ul>		
noted.		<ul> <li>Form 1099-MISC (various ty proceeds)</li> </ul>	ypes of inc	ome, prizes, awards, or gross
related	e developments. For the latest information about developments I to Form W-9 and its instructions, such as legislation enacted they were published, go to www.irs.gov/FormW9.	Form 1099-B (stock or mutu transactions by brokers)		
		<ul> <li>Form 1099-S (proceeds from</li> </ul>	m real esta	te transactions)
Purp	oose of Form	<ul> <li>Form 1099-K (merchant care</li> </ul>	d and third	party network transactions)
informa	ividual or entity (Form W-9 requester) who is required to file an ation return with the IRS must obtain your correct taxpayer	<ul> <li>Form 1098 (home mortgage 1098-T (tuition)</li> </ul>	interest),	1098-E (student loan interest),
	cation number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption	<ul> <li>Form 1099-C (canceled deb</li> </ul>	ot)	
	er identification number (ATIN), or employer identification number	<ul> <li>Form 1099-A (acquisition or</li> </ul>	abandonm	ent of secured property)
(EIN), t	o report on an information return the amount paid to you, or other it reportable on an information return. Examples of information	Use Form W-9 only if you a alien), to provide your correct	TIN.	
	s include, but are not limited to, the following. I 1099-INT (Interest earned or paid)	If you do not return Form W be subject to backup withhold		equester with a TIN, you might Vhat is backup withholding,

later.

By signing the filled-out form, you:

- 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, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting, later, for further information.

**Note:** If you are a U.S. person and 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 under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 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 section 1446 withholding on your share of partnership income.

In the cases below, the following person must give 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.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 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.  $\label{eq:continuous}$

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, give the requester the appropriate completed Form W-8 or Form 8233.

# **Backup Withholding**

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% 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, payments made in settlement of payment card and third party network transactions, 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 instructions for Part II for details),
- 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 Exempt payee code, later, and the separate instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships, earlier.

# What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code, later, and the Instructions for the Requester of Form W-9 for more information.

## **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**

#### Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C corporation, or S corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. 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 line 2,
- e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. 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 line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

## Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2,

## Line 3

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

IF the entity/person on line 1 is a(n)	THEN check the box for
Corporation	Corporation
<ul> <li>Individual</li> <li>Sole proprietorship, or</li> <li>Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.</li> </ul>	Individual/sole proprietor or single- member LLC
<ul> <li>LLC treated as a partnership for U.S. federal tax purposes,</li> <li>LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or</li> <li>LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.</li> </ul>	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
Partnership	Partnership
Trust/estate	Trust/estate

## Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to vou.

## Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 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 U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8-A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10-A common trust fund operated by a bank under section 584(a)
- 11-A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—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 13.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>&</sup>lt;sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code,

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B-The United States or any of its agencies or instrumentalities

C-A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G-A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I-A common trust fund as defined in section 584(a)

J-A bank as defined in section 581

K-A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

## Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

#### Line 6

Enter your city, state, and ZIP code.

# 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.

If you are a single-member LLC that is disregarded as an entity separate from its owner, 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 What Name and Number To Give the Requester, later, 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 SSA 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, Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and 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 U.S. 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, 4, or 5 below indicates 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 line 1 must sign. Exempt payees, see Exempt payee code earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

<sup>&</sup>lt;sup>2</sup> 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 reportable under section 6045(f), and payments for services paid by a federal executive agency.

- 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 made in settlement of payment card and third party network transactions, 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), ABLE accounts (under section 529A), 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		
Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account 1		
Two or more U.S. persons     (joint account maintained by an FFI)	Each holder of the account		
Custodial account of a minor     (Uniform Gift to Minors Act)	The minor <sup>2</sup>		
<ol><li>a. The usual revocable savings trust (grantor is also trustee)</li></ol>	The grantor-trustee <sup>1</sup>		
<ul> <li>b. So-called trust account that is not a legal or valid trust under state law</li> </ul>	The actual owner <sup>1</sup>		
Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>		
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor⁴		
For this type of account:	Give name and EIN of:		
Disregarded entity not owned by an individual	The owner		
9. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>		
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation		
Association, club, religious, charitable, educational, or other tax- exempt organization	The organization		
12. Partnership or multi-member LLC	The partnership		
13. A broker or registered nominee	The broker or nominee		

For this type of account:	Give name and EIN of
14. 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
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

- <sup>1</sup> 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.
- <sup>2</sup> Circle the minor's name and furnish the minor's SSN.
- <sup>5</sup> 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.
- <sup>4</sup> 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, earlier.

\*Note: The 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, 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 Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic 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 scarm 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 (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.ldentityTheft.gov and Pub. 5027.

Visit www.irs.gov/ldentityTheft 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. commonwealths and 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,