(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

Or income tax return. Name is seen in	W9 for instructions and the latest information.	send to the IRS.
TICITIE (DISCLESS)	to is life, do not leave this line blank	
2 Business name/disregarded entity name, if different from above	Care, PC	
3 Check appropriate box for federal tax classification of the person of following seven boxes.		
following seven boxes.	whose name is entered on line 1. Check only one of the	T
individual/sole proprietor or	orporation Partnership Trust/estate	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
single-member LLC Limited liability company. Enter the tax classification (C=C corps Note: Check the appropriate box in the line above for the tax classified in the LLC if the LLC is classified as a single-member LLC that is disre		Exempt payee code (if any)
Note: Check the appropriate box in the line above for the tax classification (C=C corp. LC if the LLC is classified as a single-member LLC that is disre- another LLC that is not disregarded from the gwar for LLS can is disregarded from the gwar for LLS can	oration, S±S corporation, P=Partnership) ►	, and the district of the second
LLC if the LLC is classified as a single-member LLC that is disre another LLC that is not disregarded from the owner for U.S. fed is disregarded from the owner should check the appropriate box other (see instructions)	garded from the owner unless the owner of the LLC is eral tax purposes. Otherwise, a single-member LLC that	Exemption from FATCA reporting code (if any)
Other (see instructions) > 5 Address (number, street)	tax diassification of its owner.	
5 Address (number, street, and apt. or suite no.) See instructions. 108 4+h Ave SW Suite A	10	Applies to accounts maintained outside the U.S.)
6 City, state, and ZIP code	PO BOX 1000 Requester's name an	nd address (optional)
11/20	. 5 0011000	
7 List account number(s) here (optional)		
(optional)		
Part I Taxpayer Identificati		
Enter your TIM is the		
backup withholding appropriate box. The TIN provided must make	he name sive	
resident alien, sole proprietor, or disregarded entity, see the instruction entities, it is your employer identification number (EIN). If you do not have	ity number (SSN). However, fe	ity number
entities, it is your employer identification number (FIN).	ns for Part I, later, For other	TITE
entities, it is your employer identification number (EIN). If you do not he Note: If the account is is	ave a number, see How to get a	- -
Note: If the account is in more than one name, see the instructions for Number To Give the Requester for guidelines on whose number to ente	or	
Number To Give the Requester for guidelines on whose number to enter	line 1. Also see What Name and Employer ide	ntification number
		ittlication number
Part II . Certification		1510000
Under penalties of perior, Land 4		1131191010121
The number shown on this form is my correct taxpayer identification I am not subject to backup withholding because: (a) I am exempt from the correct taxpayer identification of longer subject to backup withholding as a result of a not longer subject to backup.	number (or I am waiting for a number to be issued in backup withholding, or (b) I have not become fail.	to me); and
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