

Therapy South Billing Office

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FAX TRANSMISSION COVER SHEET

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Form W-9

(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; of	lo not leave this line blank	ξ,									
	THERAPY SOUTH - HOMEWOOD LLC											
	2 Business name/disregarded entity name, if different from above										—	
ෆ්												
Print or type. Specific Instructions on page 3	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.					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC					Exempt payee code (if any)						
	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ P											
	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.					Exemption from FATCA reporting code (if any)						
<u>:</u>	☐ Other (see instructions) ►					(Applies to accounts maintained outside the U.S.)						
S _C	5 Address (number, street, and apt. or suite no.) See instructions.	Address (number, street, and apt. or suite no.) See instructions. Requester's name a						and address (optional)				
See	3401 INDEPEDENCE DRIVE, SUITE 211							•				
	6 City, state, and ZIP code		1									
	HOMEWOOD, ALABAMA 35209											
	7 List account number(s) here (optional)											
	·											
Par	1 2										_	
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid					cial secu	rity nur	nber					
reside	o withholding. For individuals, this is generally your social security nur nt alien, sole proprietor, or disregarded entity, see the instructions for	Part I later For other	iber (SSN). However, for a] [$\overline{}$	
entities	s, it is your employer identification number (EIN). If you do not have a r	number, see How to ge	et a] ⁻ [] -				
TIN, la				or								
Note:	If the account is in more than one name, see the instructions for line 1 or To Give the Requester for guidelines on whose number to enter.	Also see What Name and Employer identification number										
	to and the requests for galactines on whose number to enter.			4	7 -	3 3	9	0 2	4	2		
Part	II Certification									-		
	penalties of perjury, I certify that:											
	number shown on this form is my correct taxpayer identification numb	nor for Low welling to										
Z. ram Serv	not subject to backup withholding because: (a) I am exempt from bac rice (IRS) that I am subject to backup withholding as a result of a failur longer subject to backup withholding; and	ckun withholding or (h	Al have r	ant b	1000 001	lifical be	444	Internal	Reve ne th	enue at I a	m	
	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	of from EATCA reportin	an ie com	root								
Certific	cation instructions. You must cross out item 2 above if you have been no	ntified by the IBS that we	ali ara cui	mont	ونطيع	mt to be						
acquisi other ti	re failed to report all interest and dividends on your tax return. For real est tion or abandonment of secured property, cancellation of debt, contribution of the certification, but the certification, but the certification, but the certification, but the certification is the certification.	tate transactions, item 2 ons to an individual retir	does no	t ap	ply. For	mortga	ge int	erest pa	id,		50	
Sign Here	Signature of Jawah Kelly		Date ≻	3	20	19						
Gen	eral Instructions	• Form 1099-DIV (di funds)	ividends,	incl	uding th	ose fro	om st	ocks or	mutu	ıal		
noted.	references are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of Income, prizes, awards, or gross proceeds)										
related	developments. For the latest information about developments to Form W-9 and its instructions, such as legislation enacted ey were published, go to www.irs.gov/FormW9.	Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)										
		Form 1099-S (proceeds from real estate transactions)										
			merchant card and third party network transactions)									
informa	vidual or entity (Form W-9 requester) who is required to file an ation return with the IRS must obtain your correct taxpayer	 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) 										
identifi	cation number (TIN) which may be your social security number individual taxpayer identification number (TIN), adoption	• Form 1099-C (canceled debt)										
taxpayı	er identification number (ATIN), or employer identification number	Form 1099-A (acquisition or abandonment of secured property)										
(EIN), ti amoun	o report on an information return the amount paid to you, or other t reportable on an information return. Examples of information include, but are not limited to, the following.	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.										
	1099-INT (interest earned or paid)	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										