

W-9 Guidance

The program requires a W-9 tax form to be completed for the payee of the incentives prior to enrollment. Download this form at: https://www.irs.gov/pub/irs-pdf/fw9.pdf and follow instructions on page 3 to complete the form.

Upload the completed and signed form to the program portal.

Program Requirements

Complete the top of the form as specified:

- Enter your complete name (this should match the name on your tax return)
- Check box to indicate "individual/sole proprietor"
- Enter a complete mailing address including city, state, and zip that can be used to mail your incentive check

Complete Part I – Taxpayer Identification Number (TIN)

4. Enter social security number that matches the complete name above

Complete Part II - Certification

Sign your complete name and date

Form W-9 (Rev. March 2024) Department of the Treasury Internal Revenue Service Go to www.irs.gov/FormW9 for instructions and the latest in							Give form to the requester. Do not send to the IRS.			
Before you begin. For guida	ance related to the purpose of Form W-9, see Purpose of	f Form, below.					- 22 - 24	- 1000		
 Name of entity/indivi entity's name on line 	dual. An entry is required. (For a sole proprietor or disregarded (2.)	entity, enter the or	wner's nar	ne on li	ne 1, and	d enter ti	ne busi	ness/di	srega	rded
John Smith										
2 Business name/disre	garded entity name, if different from above.									
Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Compose of the following seven boxes. Compose of the following seven boxes. Compose of the following seven boxes. Individual/sole proprietor					certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)					
box for the tax classification of its owner. Other (see instructions)					Compliance Act (FATCA) reporting code (if any)					
3b If on line 3a you chec and you are providir	cked "Partnership" or "Trust/estate," or checked "LLC" and ente ng this form to a partnership, trust, or estate in which you hav any foreign partners, owners, or beneficiaries. See instructions	e an ownership in		neck _	. (A	pplies to outside				
							ptional)		_
123 Main Stre	et									
6 City, state, and ZIP of	770	- 2								
City, State, Zi	Code									
7 List account number	William Control of the Control of th	7.0								
100011000000000000000000000000000000000										
Part I Taxpayer I	dentification Number (TIN)		1,731-2							_
Enter your TIN in the approp	er your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid				Social security number					
backup withholding. For indi	viduals, this is generally your social security number (SS r, or disregarded entity, see the instructions for Part I, la	N), However, fo	па	1 2	3 -	4 !	5 -	6 7	8	9
	Intification number (EIN). If you do not have a number,		ta C	r		1			_	
TAY, latter.					er iden	r identification number				
Note: If the account is in more than one name, see the instructions for line 1. See also What Name and				T	1 [TT	TITI			f
Number To Give the Reques	ter for guidelines on whose number to enter.		100/100		-					
Part II Certification	n		-	-			200			0.0
Under penalties of perjury, I										
	s form is my correct taxpayer identification number (or I	am waiting for a	a number	to be	issued	to me);	and			
2. I am not subject to backup	o withholding because (a) I am exempt from backup with oject to backup withholding as a result of a failure to rep	hholding, or (b)	I have no	t been	notifie	d by the	Interr			
I am a U.S. citizen or othe	r U.S. person (defined below); and									
4. The FATCA code(s) entere	ed on this form (if any) indicating that I am exempt from I	FATCA reporting	g is corre	ect.						
because you have failed to re acquisition or abandonment o	ou must cross out item 2 above if you have been notified b port all interest and dividends on your tax return. For real el if secured property, cancellation of debt, contributions to a nds, you are not required to sign the certification, but you	estate transactio an individual reti	ns, item : rement a	2 does rrangen	not app nent (IR	ly. For i A), and,	mortga gener	ge inte ally, pa	erest syme	nts
Sign Signature of U.S. person	hn Smith	D	ate 1-	1-202	5					