

AGENT'S APPLICATION IMPORTANT: Please also sign and return Form SD274 Notification/Release of Information form.

PLEASE PRINT OR TYPE ALL INFORMATION MUST BE FURNISHED

	1. Full Name						2. SS	2. SS No.					
NAL	3a. Residence St	reet Address	3					3b. C	ounty				
ERSONAL	3c. City		3d. State		3e.	e. Zip 4. Bir		thdate		5. Spouse's First Name			
PE	6. Home Phone 7. Cell/Fax			Number (circle one) 8		8. E	8. Email					9. Do you speak Spanish? ☐ Yes ☐ No	
	10. Have you ev	er been con	victed of a	felony inv	olving disho	nesty	or breach of	f trust?	Yes	□No			
GA	11a. If you are to be appointed under one of our G.A.'s or National A Agreements, please give us the name.			al Acco	count 11b. Agency Manager's Name			е					
	12a. Agency Nan	ne (if applica	ble)			12b	o. Phone	Phone 12c. Fax					
တ	12d. Business Ma	ailing Addres	s: P.O. Box			126	e. Street				12	f. Suite	
NES	12g. City				12h. County	,		12i. State		1	ı2j. Zi _l	p	
USIN	13a. Taxpayer's I									ation?			
B	13c. Commissio						13d. Are you						
	13e. If you are not the primary officer/owner of the Corp., please have that individual complete a separate Agent Application to be appointed also.												
_	14. Employment Record 5 Years to Date												
EMPLOYMENT	Period (from-to) Company By Whom En			nployed Locati			tion Tit					Reason for Leaving	
W													
PLC				,									
M													
	15. Have you bee	en licensed v	vith us befor	e? □ Yes	s 🗌 No		16. How did you learn of Illinois Mutual?						
SC	17. Primary Life Company					18. Primary Health Company							
Σ	19. Primary Annuity Company					20. Primary Workplace Company							
I hereby apply to be an agent of Illinois Mutual Life Insurance Company. I represent that the answers recorded in this application are true and correct to the best of my knowledge and belief. I agree to be bound by the terms of an Agent's Contract if one is issued to me.													
Date _	te Signature												
	Date Signature NOTE: Please print your name with your signature on all applications and use your code number, when assigned.								se your code number,				
We alv	ways appreciate re	eferrals so w	e hope you l	know anot	her agent wh	o migh	nt be intereste	ed in repres	enting	us:			
Name						F	Phone Number ()						
Street City and State						Zip _							
				DI ENSE (OMDI ETE I	J O 27/	ON DEVED	SE SIDE					



NOTIFICATION/RELEASE OF INFORMATION **AUTHORIZATION**

The purpose of this form is to notify you that a Consumer Report and/or Investigative Consumer Report will be obtained in the course of evaluating your application for appointment as an agent of Illinois Mutual Life Insurance Company ("Illinois Mutual").* I hereby authorize Illinois Mutual to obtain such reports.

I hereby authorize Illinois Mutual or its agents to contact any and all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county, federal courts, and military services to release information about my background including, but not limited to, information about my employment, education, consumer credit history, driving record, criminal record, character, general reputation, personal characteristics, mode of living, and general public records history to the person or company with which this form has been filed. This authorization releases the aforesaid parties from any liability and responsibility for collecting the above information. I understand I will obtain a free copy of this Consumer Report prior to an adverse action/decision being made based on the information in the Consumer Report. I understand that I must notify Illinois Mutual within 10 business days if I disagree with the accuracy of any information contained in the report.

I understand that Illinois Mutual will use the services of Vector One, a debit balance reporting agency, in the evaluation and processing of my application for appointment. I authorize and consent to Illinois Mutual conducting such an investigation and also consent to Illinois Mutual obtaining periodic debit balance checks through Vector One. I also understand that Illinois Mutual reserves the right to report any outstanding debit balances to Vector One.

I certify that I have been given a summary of my rights under the Fair Credit Reporting Act.

I release Illinois Mutual from any liability in connection with the information furnished pursuant to this authorization. I release and agree to hold Illinois Mutual harmless from all liability and responsibility for collecting the above referenced information. A copy of this authorization may be accepted with the same authority as the original.

I UNDERSTAND THIS AUTHORIZATION ALLOWS PROCUREMENT OF A CONSUMER OR INVESTIGATIVE REPORT FOR PURPOSES OF CONTRACTING AS AN AGENT OF ILLINOIS MUTUAL.

For Applicants in Minnesota, and Oklahoma ONLY: ☐ By checking this box, I hereby request a copy of any consumer report or investigative consumer report obtained by Illinois Mutual be sent to the address below. For Applicants in California ONLY:

We will be obtaining a consumer report from GIS, 917 Chapin Rd, Chapin, SC 29036, (877)-590-4012. You have the right to request from that agency, upon proper identification, the nature and substance of all information in its files on you, including the sources of information and the recipients of any reports on you which the agency has previously furnished within the three-year period preceding your request. You may view the file maintained on you by the agency during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the actual costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone.

Mutual be sent to the daaress below.	
Printed Name of Applicant:	
Signature of Applicant:	

☐ By checking this box, I hereby request a copy of any consumer report or investigative consumer report obtained by Illinois

*A Consumer Report for the purpose of employment, contracting, or appointment, has no effect on your credit score.

FAX TO: 309-674-1475

MAIL TO: Illinois Mutual, Agent Contracting, 300 S.W. Adams Street, Peoria, IL 61634

Address:

Date:



AGENT CONTRACTING AND COMMISSION APPOINTMENT GUIDE

Illinois Mutual sells insurance products in all states except AK, DC, HI and NY; however, not all products are offered in all states. Insurance applications taken in states where Illinois Mutual is not licensed or where a product is not available are not accepted. Applications from someone whose resident state is AK, DC, HI or NY also are not accepted. You must be properly licensed in all states where you sell, solicit or negotiate insurance.

APPOINTMENT GUIDE

State requirements are subject to change. Please contact our Agent Contracting and Commissions team at (800) 437-7355, ext. 753 to verify current licensing requirements for the state in which you are submitting business.

Concurrent Appointment States: In the following states, agents can be appointed after submitting the first application:

Alabama**	Maine**	Oklahoma**
Arizona	Maryland	Oregon
Arkansas**	Massachusetts**	Rhode Island
California [†]	Michigan**	South Carolina**
Colorado	Minnesota**	South Dakota**
Connecticut**	Mississippi**	Tennessee**
Delaware**	Missouri	Texas^
Florida***	Montana**	Utah**
Georgia**	Nebraska**	Vermont**
Idaho**	Nevada**	Virginia [^]
Illinois	New Hampshire**	Washington**
Indiana	New Jersey**	West Virginia**
lowa^	New Mexico**	Wisconsin**
Kansas^	North Carolina**	Wyoming**
Kentucky**	North Dakota [^]	
Louisiana**	Ohio^	

Agents must be appointed <u>prior</u> to taking policy applications in the following states*:

Pennsylvania^^

All agents must be licensed in the application state at the time of writing an application. The agent application to Illinois Mutual can be on file in the Home Office or can accompany the application (except in pre-appointment states). Agents who sell life insurance products also must complete an Anti-Money Laundering (AML) program through LIMRA or provide Illinois Mutual with certification of completion through another vendor.

Note: Some states have time limits within which Illinois Mutual must appoint agents. These time limits start on the date the first policy application is submitted to the Home Office. Policy applications will be declined if we do not receive your agent application in sufficient time to process your appointment within the time limit. Time limits are as follows (refer to state charts at left):

- † <u>14-day states</u>. These states require Illinois Mutual to appoint within 14 days of receipt of first application.
- ** <u>15-day states</u>. These states require Illinois Mutual to appoint within 15 days of receipt of first application.
- ^ 30-day states. These states require Illinois Mutual to appoint within 30 days of receipt of first application.
- *** <u>45-day states</u>. These states require Illinois Mutual to appoint within 45 days of receipt of first application.
- ^^ Agent can write on the day Illinois Mutual processes the appointment (minimum 3 working days from the date agent's paperwork is received in the Home Office).



FACTS

WHAT DOES ILLINOIS MUTUAL LIFE INSURANCE COMPANY DO WITH YOUR PERSONAL INFORMATION?

Why?

Financial companies choose how they share your personal information. Federal law and state law give consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Personal Information, such as name, address and Social Security number
- Demographic Information
- Employment Information, such as employment history
- Medical Information, such as medical history and records
- Financial Information, such as account numbers
- Internet or Other Electronic Network Activity Information, such as browsing history or IP address
- Insurance Product Information, such as policy numbers and policy values

When you are no longer our customer, we continue to share your information as described in this notice.

How?

All financial companies need to share customer personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customer personal information; the reasons Illinois Mutual Life Insurance Company chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Illinois Mutual share?	Can you limit this sharing?		
For our everyday business purposes — such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No		
For our marketing purposes — to offer our products and services to you	Yes	No		
For joint marketing with other financial companies	No	No		
For our affiliates' everyday business purposes — information about your transactions and experiences	No	No		
For our affiliates' everyday business purposes — information about your creditworthiness	No	No		
For nonaffiliates to market to you	No	No		

Questions?	Call 1-800-437-7355, ext. 436 or send email to Privacy@IllinoisMutual.com
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Who we are	
Who is providing this notice?	Illinois Mutual Life Insurance Company, 300 SW Adams Street, Peoria, IL 61634

What we do	What we do							
How does Illinois Mutual protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with state and federal law. These measures include computer safeguards, access limitations, and secured files and building.							
How does Illinois Mutual collect my personal information?	We collect your personal information, for example, when you: • apply for a product • make a claim • communicate • transact with us • apply to become an agent							
	We also obtain information from your healthcare providers, employers, and other insurance companies. With your authorization, we may use insurance support organizations to collect information and provide an investigative consumer report to us. That organization may keep the report and disclose its contents to other companies.							
Who does Illinois Mutual share your personal information with?	 Agents Reinsurers Medical Professionals Service Providers who are under contract to not further disclose your information 							
Why can't I limit all sharing?	Federal law gives you the right to limit only: • sharing for affiliates' everyday business purposes – information about your creditworthiness • affiliates from using your information to market to you • sharing for nonaffiliates to market to you							
	State laws and individual companies may give you additional rights to limit sharing.							
Access and Correction	Illinois Mutual has procedures by which you can obtain access to personal information about you appearing in our policy files and by which you may request a correction, amendment or deletion of information you believe is inaccurate. Please notify us if you think any information is incorrect, and we will review it. If we agree, we will correct our files. If we do not agree, you may submit a statement which we will keep in your file and provide with any future disclosure of the disputed information.							

Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. Illinois Mutual does not have any affiliates.
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. These are service providers that perform business functions.
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. Illinois Mutual does not joint market.



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 to	ax return). Name is re	quired on this line; do i	not leave this line blank.									
	2 Business name/disregarded entity	name, if different from	n above										
n page 3.							certa	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
e.	single-member LLC						Exem	pt payee	code	(if any)_			
충	Limited liability company. Enter	the tax classification	(C=C corporation, S=S	corporation, P=Partner	rship) ▶								
Print or type. Specific Instructions on page	Note: Check the appropriate bot LLC if the LLC is classified as a another LLC that is not disrega is disregarded from the owner s	single-member LLC triangle single-member LLC triangle single-member to the single-member to the single-member the single-member LLC triangle.	that is disregarded fror for U.S. federal tax pur	n the owner unless the cooses. Otherwise, a sing	owner of the gle-member	e LLC is	code	ption fro	m FA	ГСА геро	orting		
cifi	Other (see instructions)	illouid check the appi	Topriate box for the tax	Classification of its own	ei.		(Applie	s to account	s mainta	ined outsid	e the (J.S.)		
) Spe	5 Address (number, street, and apt.	or suite no.) See instri	uctions.		Requeste	r's name							
See S										•			
Ø	6 City, state, and ZIP code												
	7 List account number(s) here (option	nal)											
Pai	t I Taxpayer Identific	ation Number	(TIN)										
	your TIN in the appropriate box. T		• •	given on line 1 to av	oid	Social s	ecurity	number					
	up withholding. For individuals, this				or a				7 [
	ent alien, sole proprietor, or disrega es, it is your employer identification				ot a		-		-				
TIN, la		Tridifiber (Liiv). If y	ou do not nave a nu	iliber, see riow to ge	n a O	r							
Note:	: If the account is in more than one	name, see the ins	tructions for line 1.	Also see What Name	_		er identi	fication	numb	er			
Numb	Number To Give the Requester for guidelines on whose number to enter.						T						
							-						
Par	t II Certification												
Unde	r penalties of perjury, I certify that:												
2. I ar Sei	e number shown on this form is my m not subject to backup withholdir rvice (IRS) that I am subject to bac longer subject to backup withhold	ng because: (a) I an kup withholding as	n exempt from back	up withholding, or (b)) I have no	t been	notified	by the	Inter				
3. I ar	m a U.S. citizen or other U.S. perso	on (defined below);	and										

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

	acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.							
Sign Here	Signature of U.S. person ►	Date ►						

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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, 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.

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),
 - 3. 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
Individual Sole proprietorship, or Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single- member LLC
LLC treated as a partnership for U.S. federal tax purposes, LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or 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.	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 you.

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 ¹	Generally, exempt payees 1 through 5 ²			
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4			

¹ 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.

² 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

	<u>'</u>
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
3. 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 ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor*
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 ⁴
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

- ¹ 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.
- ² Circle the minor's name and furnish the minor's SSN.
- ³ 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.
- ⁴ 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 scam 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 <code>phishing@irs.gov</code>. 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 <code>spam@uce.gov</code> or report them at <code>www.ftc.gov/complaint</code>. You can contact the FTC at <code>www.ftc.gov/idtheft</code> or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see <code>www.ldentityTheft.gov</code> and Pub. 5027.

Visit www.irs.gov/IdentityTheft 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.

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