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Mountain View Wittman fetial (intell) Independent Contractor for Professional Services Agreement

(Marie Carriel and Thirty Bart Starty)

THIS	AGREEMENT is treater and entered into see	January La"	and the first the second second
lsy a	ng between and Mountain View Whivman Sch	and the trust ("The struct") and Red L	
L 5. (intractor") Contractor and District may be ref	offed to horem endoublaity as a Facty	egol : radione through the Thomas Tomas Com-
	Services. The District is authorized by Gaw. Co advice in financial, economic, accounting, engi experienced and competent to perform this sp services ("Services" or "Work"). The Contracti perform the Services. As Indicated in Ed.	neering, legal or administrative matters legial services required. The Contractor or warrants that it is specially trained. Is	of these garages are upon with teaters and upon the contract for the contract that followers
~	Prior & Payment. The Contractor shall furnish Contractor is providing services for a tota Contractor will provide a maximum numb	I flat fee of . 5 7,360	
	•		
	per hour for a total not to exceed 5		
	Cither: ("Agreement Price"): Payment for the Service approve Contractor's form of invoice, which is provided to, period of service, number of hou	nust be sufficiently detailed (e.g., name	of school or department service was
2	Agreement Time. The Services shall commen	Taniaru	25 ^{+h} 2019 and
_	shall be completed by	May 17th	20 19 . ["Agreement Time"]
4.	Submittal of Documents. The Contractor s		this Agreement until the Contractor has
ę	subgenes the following documents as indicate	ad below (Check all that are required).	-
	Senec Agreement U insurant	z Certificates & Endorsements	W-9 form
S .	Notice. Any notice under this Agreement that enther personally deliwered (effective upon re- outhest day next following delivery thereof to	ceipt) or sent by overnight delivery serv	i, and received if given in writing and ice addressed as follows (effective the
	Moumain View Whisman School District	constructor Kidz Topros	
	LAIS MACRICIANS	P.O. Box 1157 Fremont, CA 94539	
	Mountain View, CA S4643	Fremone, CA 94539	
	Attentional leasures Offices	Am Community Manage	e e e e e e e e e e e e e e e e e e e
		and the second s	

	CHlenders). These particulars will consist to sently that the of the employees of any subscriptions and embles who services that
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one of these two baxes below must be checked	egan staw without him to a section of any the without
E	
	tion requirements of Education Lode section 45125-1 apply to
	or contidies its compliance with these provisions as follows: "Contrac
	rinting and criminal background investigation requirements of
	ctur's employees, subcontractors, agents, and subcontractors'
	those Employees are paid or unpaid, concurrently employed by the
	actor, who may have contact with District purple in the zourse of lifornia Department of Justice has determined that none of those
	defined in Education Code section 45172.1 A complete and accurate
	I pupils during the course and scope of the Agreement is attached
hereto."	the beautiful the form of and stable of the advances of accounts to
П	
	OYEE ONLY. Contractor's employees will have only limited contact
	ate steps to protect the safety of any pupils that may come in contac
	d criminal background investigation requirements of Education Code
	ces under this Agreement. As an authorized District official, I am.
45125.1 (c).)	to execute this certificate on behalf of the District. (Ed. Code, §
District Representative's Name & Initials CMM	M NAWYN INITIAL HERE ON
Tuberculosis (TB) Screening. Check one of the following b	
The District has a statement of TB Clearance on file	le for each person
	ed to provide evidence of TB Clearance because Contractor will not
work directly with students on more than an occasion.	ar pasis
INITIAL HERE B (Contractor initials). INITIAL HERE	(District Representative initials)
The territory in the second se	Loss of he presented to the total
Insurance: Contractor shall have and maintain insurance in	n force during the term of this Agreement with minimum limits
	ertificate(s) of insurance and endorsements satisfactory to the
District. The policy(ies) shall not be amended or modified	and the coverage amounts shall not be reduced without thirty (30)
days written notice to the District prior to modification. Ex	xcept for worker's compensation insurance, the District shall be
named as an additional insured on all policies. Contractor's	s policy(ies) shall be primary; any insurance carried by the District
shall only be secondary and supplemental. Contractor shall	Il not allow any subcontractor, employee, or agent to commence
Work on this Agreement or any subcontract until the insur-	ance required of Contractor, subcontractor, or agent has been
obtained.	
Commercial General Liability	\$1,000,000 per occurrence; \$2,000,000 aggregate
Automobile Liability, Any Auto, combined single limit	\$1,000,000 per occurrence; \$2,000,000 aggregate
Workers Compensation	Statutory limits pursuant to State law
Employers' Liability	\$1,000,000
Professional Liability (E&O), If Contractor is providing	\$1,000,000

Professional Liability (E&O), If Contractor is providing	\$1,000,000
professional services or advice (on a claims-made form)	
	complete with the Terror C. Conditions attached burney

9 Terms & Conditions. The Contractor has read and agrees to comply with the Terms & Conditions attached hereto.

INITIAL HERE 1 (Contractor initials).

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Standard of Care

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- 2. Without Cause by Committee Contractor Contractor may 1707 కుండింది. మూమ్ మూహా కొడకుండా ఉంది. కూడా ఉంది. మూమా కెంకు కే Committee the Applement of the the American Daile of the state of the compact of Tonnerson for Left lise seems all links removed to the date of ferm matter. Whater colour by limite flow that te princet is not time pendone le d'africa . . Description of the second of t THE TOTAL PARTY HAVE A REPORTED A REPORT THE THE THE TOTAL THE attempt to produce the penders from another south
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我们的一点,**都**被我们就没有<mark>我的,我就是我们的,我就要</mark>我的,我们就是这个人,我就是一样的,我们的,你们也没有这样的。" and the state of t Provide the Company of the Company o Francis Man American And Man Man and a second of the same of the same of the second of the second of the same of t Region of the grant of the second of the sec But the second state of the second second second second second second second per grant the residence of the residence

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- 33. Assignment: The abiguitaria of the content of purisous Co. 3. Audit unassetim construction of ast income and country co. 3.
- with 60 fames and regulations of the guarantees board in the of Contraction Co. without Lorent this Agreement . Attraction Ca. Particle and an halfarian reads and angle and engages of its section decreases and its earlies that the court prince STREET, For and regulation bearing on consist of the Lero co. Contractor side person for the last of ത്ത് സ്ക്യൂസ് അത്രയ്ക്ക് ന് Construction സ്വായം പ്രവാശം അത്രം പ്രവാശം വിശ്യായില് നിരുന്നു. വിശ്യായില് നിരുന്ന വിശ്യായില് വിശ് ತರ್ಕ ಸಂಘಟಕ್ಷಣ ಕರ್ನ C1 ಗೀವುಕವರೆ ಧರ್ಮಸಿಲ್ ಗಂಪ್ರೆಸ್ ಕರ್ನಾಟಕಾಗಿಸಿ ಗಳು ಗೀವರ್ ಕರ್ನಾಟಕಾಗಿ ಸಂಪರ್ಕಸ್ವಾಸಿಕ ಗಳು ಸಂಪರ್ಕಗಳ ಸಂಪರ සිවරිරට 8 මර්රයාවූ මෙකි. වේ ජීම කිරීම ප්රදේශම සිට විවාසියාගේ වේ වාසියාගේ වෙස මාස් කිරීමට කිරීමට සම්බන්ධය වැඩ වාසමෙන් වෙසට Medicalary allocated for the Happe of the Service of the transfer of the Service Apprehiments and the serminated effective sport Contrasturium associations obtained about a survey contrasturium bushing the recordination services term representation of the Second of the Second of the Control of the Con tight action performs and with a that it in probability of any lawn. It is Destruct's Evaluation of Contractor and Contractor.
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- t witte lang ladder, in the performable of the Agreement Agreement Earthorn historia obligations wilder the Agreement Commonwealth interestable to expension from 100 photost the limbour on the sourcement of the compensation provided in raion ond nazadiu i gortanicy ka laketi whathi, wat anii anii gan Aprophation - Nationalistanding ani anii gaba

And the second s 作者(Januar Rain) Januar Daniel Primarke (Arm. 1997) Application (Arm. 1997) 100 July 100 July 100 July 100 St. 機能性機能の試験に さい 特 c 動は対象の make or provident log entropy control press page of a page of a page of the control page of the contr

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red broken have a regulational without first hatty of the **Employees and/or Subcontractors**. The Direct may equilibre ිට පැහැකි. ඇති වෙනවාදීමේ යන්ෆ්ර්ක්රිකා කරණ මිසින් වෙන එක්න නිය විතාන් වෙනවාදීමේ සම්බන්ධ සම්බන්ධ වෙනවාදීමේ වෙනවාදීමේ එම ලස the Difficial execution has added ambiest entire or is the medical and a contract of the contract శాగ్పురుగాలు, మ్యుత్స్ మెడ్ ముందుకోతోంది. గ్రామంలో క్రోమం ఎఎస్ కొంతేవున్ అర్థుడుంతాయు తొందు అముందుకోకువడినిన ప్రధాన නුමෙන් . මුති නැමෙනුම සිට වේ ද 'මිකුටුම්කි මිට වෙන්නම්කින් ම "නා නම්නිව් වෙන්නම්කින් එම සිට වෙන්නම්ක මේ වෙන්නම්ක මේ වෙන්නම්ක වෙන්නම්ක

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Appending in no event, shall listife he liable, registless of which may also be a result of soils change and he bidget to whother any claim is based on contract of tout, for any special, libitrict's afternions in writing. Periodic ill describe all this consequential, indiced or incidental damages, including, but not. Agreement, Consequing acceptation lives it is familiar with the limited to, lost profits or revenue, unsing out of ar in connection, provisions of Section 1990 or any and Section 1990 of any with this Agreement for the services performed in consistion, the Government Code of the finite of California, and continue that with this Apprentment.

- performance of Work, Agreement interpretation, or payment, subarquent to execution of this Agreement, which implifi the Parties shall attempt to resulve the dispute by negotiation, constitute a violation of said printings, Constitute water it shall and/or mediation, if agreed to by the Parties. Pending resolution of the dispute, Contractor shall neither restind the Agreement 79 Agreement Contingent on Governing Board Approved. The hat stop Work
- personnel, employee(s), and/or subcontractor(s) shall maintain. Governing Board, and no payment shall be sweet or made to the confidentiality of all information received in the course of Contractor street formal approval. performing the Services This requirement to maintain confidentiality shall extend beyond the termination of this
- 22. Integration/Entire Agreement of Parties. This Agreement constitutes the entire agreement between the Parties and supersedes all prior discussions, negotiations, and agreements, whether oral or written. This Agreement may be amended or modified only by a written Instrument executed by both Parties.
- 23. California Law. This Agreement shall be governed by and the rights, duties and obligations of the Parties shall be determined and enforced in accordance with the laws of the State of California. The Parties further agree that any action or proceeding brought to enforce the terms and conditions of this Agreement shall be maintained in the California county in which the District's administration offices are located.
- 24. Waiver. The waiver by either party of any breach of any term, covenant, or condition herein contained shall not be deemed to be a waiver of such term, covenant, condition, or any subsequent breach of the same or any other term, covenant, or condition herein contained.
- 25. Severability. If any term, condition or provision of this Agreement is held by a court of competent jurisdiction to be invalid, void or unenforceable, the remaining provisions will nevertheless continue in full force and effect, and shall not be affected, impaired or invalidated in any way.
- 26. Incorporation of Recitals and Exhibits. The Recitals and each exhibit attached hereto are hereby incorporated herein by reference.
- 27. Drug-Free/Smoke Free Policy. No drugs, alcohol, and/or smoking are allowed at any time in any buildings and/or grounds on District property. No students, staff, visitors, Contractors, or subcontractors are to smoke or use drugs or alcohol on these SHEE
- 28. Conflict of Interest. Contractor shall abide by and be subject to all applicable District policies, regulations, statutes or other laws regarding conflict of interest. Contractor shall not hire any officer or employee of District to perform any service by this Agreement. Contractor affirms to the best of his/her/its knowledge, there exists no actual or potential conflict of interest between Contractor's family, business or financial interest and the services provided under this Agreement, and in the event of change in either private interest or services under this Agreement, any question regarding possible conflict of interest

it does not know at any facts which constitute a violation of said 20. Disputes in the event of a dispute between the parties as to provinces, in the event Contractor receives any information perily District of this information

District shall not be besend by the terms of this Approximation and the 21. Confidentiality. The Contractor and all Contractor's agents, has been formally expressed or radial by the fastist's

ACCEPTED AND AGREED on the date indicated below. By signing this Agreement, each Party cortifies, under periody of periody, that all the information provided in the Agreement is true, complete, and correct and that the person executing this Agreement has held power and authority to enter into the Agreement Information regarding Contractor indicate type of entity or if individual: Individual Employer Identification and/or Social Security Number 23-0619451 MOTE: United States Code, title 26, sections 6941 and 6189 require non-corporate racipients Sole Proprietorship Partnership of \$600 or more to furnish their taxpayer identification number to the payer. The tinited Status Code also provides that a penalty may be imposed for failure to furnish the tangeger Limited Partnership identification number. In order to comply with these rules, the District requires your Corporation federal tax identification number or Social Security number, whichever is applicable. Limited Liability Company Other: Dept/Site Budget Program Coding 130 Program Code(s): **Project Approvals Required Prior to Contract Start Date** Requesting Administrator/Authorized Signer: Contractor: Contractor Name: Kidz To Pros Mountain View/Whisman School District Dated: January 16th 2019 Dated: Signature: ZBC
Print Name: Ryan Bender Signature: Print Title: Community Manager APPROVAL Authorized Signer (if not above) Superintendent/Designee Dated: , 20 Dated: , 20 Signature: Signature: Print Name: Print Name: Print Title: Print Title:

Board of Trustees Action (District Office Use Only)

For Contract:

Review

Ratification

Board of Trustees Meeting Date:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/05/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). Sandie Estrada PRODUCER 877-230-1342 PHONE (A/C, No. Ext): E-MAIL ADDRESS: 661-622-4177 TWEG Insurance Services sestrada@twfq.com 39812 Mission Blvd. Ste 101 Fremont, CA 94539 INSURER(S) AFFORDING COVERAGE NAIC # Philadelphia Insurance Co 092535 INSURER A 56027 AG-Administrators INSURED INSURER B 011826 Employers Preferred Insurance Co Kidz to Pros. Inc. INSURER C P.O. Box 1157 INSURER D Fremont, CA 94539 INSURER E INSURER F **REVISION NUMBER:** CERTIFICATE NUMBER: **COVERAGES** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDLISUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER 1.000.000 X COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 100,000 CLAIMS-MADE X OCCUR 5,000 MED EXP (Any one person) 1.000.000 PHPK1833846 06/20/2018 | 06/20/2019 Х PERSONAL ADVINJURY 2,000.000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER Included X POLICY PRODUCTS - COMP/OP AGG OTHER COMBINED SINGLE LIMIT (Ea accident) s 1,000,000 AUTOMOBILE LIABILITY BODILY INJURY (Per person) \$ ANY AUTO OWNED AUTOS ONLY HIRED SCHEDULED AUTOS NON-OWNED PHPK1838846 06/20/2018 06/20/2019 BODILY INJURY (Per accident) s PROPERTY DAMAGE \$ (Per accident AUTOS ONLY AUTOS ONLY \$ UMBRELLATIAN EACH OCCURRENCE OCCUR **EXCESS LIAB** AGGREGATE CLAIMS-MADE \$ DED : RETENTION \$ X PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 1,000,000 E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE 07/05/2018 07/15/2019 EIG2671120 00 N/A OFFICER/MEMBER EXCLUDED? (Mandatory in NH) 1,000,000 E.L. DISEASE - EA EMPLOYEE 1,000,000 If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT Accident Medical Accident Blanket US746968 10/27/2017 10/27/2018 Expense 25,000 В Disemberment 10,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Operations of the named insured A-Professional Liability 1,000,000 included A-Molestation or Abuse 1,000,000 included 1.000,000 included A-Assult or Battery CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Mountain View-Whisman School District 750 San Pierre Way A AUTHORIZED REPRESENTATIVE Mountain View, CA 94043 Sandie Estrada

UNITED STATES LIABILITY INSURANCE GROUP WAYNE, PENNSYLVANIA

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

BLANKET ADDITIONAL INSURED ENDORSEMENT **

Section II - Who Is An Insured is amended to include as an insured any person, entity or organization that is:

- 1. A franchisor under a franchise agreement with the Named Insured as franchisee relating to "your work"; or
- 2. A licensor under a license agreement with the Named Insured as licensee relating to "your work"; or
- 3. A co-owner with the Named Insured in premises used for "your work"; or
- 4. A majority owner with a controlling interest in the Named Insured but only with respect to liability arising out of such owner's (i) financial or operational control of the Named Insured; or (ii) ownership, maintenance or use of premises leased or occupied by the Named Insured for purposes of "your work"; or
- 5. A mortgagee, assignee or receiver of the Named Insured relating to "your work"; or
- 6. A lessor, or an agent of a lessor, under a lease agreement with the Named Insured as lessee relating to "your work"; or
- 7. A grantor of a permit to the Named Insured as permitee relating to "your work". However, if the grantor of a permit is a federal, state or local government or political subdivision, there is coverage under this endorsement only for liability arising from:
 - a. The existence, maintenance, repair, construction, erection or removal of advertising signs, awnings, canopies, cellar entrances, coal holes, driveways, manholes, marquees, hoist away openings, sidewalk vaults, street banners or decorations and similar exposures; or
 - b. The construction, erection or removal of elevators; or
 - c. The ownership, maintenance or use of any elevators covered by this insurance; or
- 8. A lessor of equipment leased to the Named Insured relating to "your work"; or
- 9. A contributor, benefactor, or supporter who provides financial assistance to the Named Insured in connection with "your work";

but only to the extent the Named Insured is required to add such person, entity or organization as an additional insured to this policy under a written contract, written permit or written agreement relating to "your work".

Such person, entity or organization is an insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" that is caused, in whole or in part by your acts or omissions or the acts or omissions of those acting on your behalf in connection with "your work" while such written contract, written permit or written agreement is in effect.

EXCLUSIONS

There is no coverage under this endorsement for loss or expense, including but not limited to the cost of defense for "bodily injury", "property damage" or "personal and advertising injury":

- 1. That occurs after all of "your work", including materials, parts or equipment furnished in connection with "your work" and performed under a written contract, written permit or written agreement has ended; or
 - When that portion of "your work" out of which the "bodily injury", "property damage" or "personal and advertising injury" arises and performed under a written contract, written permit or written agreement has been put to its intended use by any person(s) or organization(s);
 - whichever occurs first.
- 2. Arising directly or indirectly from construction or demolition operations of any kind performed by you.
- 3. Caused or alleged to be caused by the sole negligence of an additional insured under this endorsement.
- 4. Arising out of "your work" performed for a federal, state or local government or political subdivision under a written permit.
- 5. Included within the "products-completed operations hazard".

CONDITIONS

Coverage provided by this endorsement will be excess over any insurance available to any additional insured under this endorsement unless a written contract, written permit or written agreement specifically requires that coverage under this endorsement is primary.

All other terms and conditions of this policy remain unchanged. This endorsement is a part of your policy and takes effect on the effective date of your policy unless another effective date is shown.

L 744 NPP (06-10)

Form W-9

(Rev. November 2017)
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; de KidzToPros Inc	not leave this line blank.									
1	2 Business name/disregarded entity name, if different from above										
page 3.					i	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
Print or type. Specific Instructions on page	single-member LLC					Exempt payee code (if any)					
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) 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.				IS	Exemption from FATCA reporting code (if any)					
# <u>#</u>		ax Classification of its own	.		1,	(Applies to accounts maintained outside the U.S.)					
ě,	Other (see instructions)		Request	er's na		and address (optional)					
	5 Address (number, street, and apt. or suite no.) See instructions.			a Shah							
See	P.O.Box 1157		P.O.Bo	ox 1157							
•	6 City, state, and ZIP code		Fremo	nt, C	A 94	538					
	Fremont, CA 94538										
	7 List account number(s) here (optional)										
Par	Taxpayer Identification Number (TIN)										
	your TIN in the appropriate box. The TIN provided must match the nar	ne given on line 1 to av	oid	Socia	l secu	rity nu	mber				
backu	n withholding. For individuals, this is generally your social security nur	nber (SSN). However, t	ora			1 [\Box		T		
reside	nt alien, sole proprietor, or disregarded entity, see the instructions for	Part I, later. For other			ĺ	-		-	1 1		
entitie	s, it is your employer identification number (EIN). If you do not have a	number, see How to ge	ta I			J		,			
TIN, later.					over in	r identification number					
Note:	If the account is in more than one name, see the instructions for line 1	. Also see What Name				, identification in the interest in the intere					
Numo	er To Give the Requester for guidelines on whose number to enter.			82	-	0619	9451				
Par	Certification										
	penalties of perjury, I certify that:										
	number shown on this form is my correct taxpayer identification num	her for Lam waiting for	a numbe	er to b	e issu	ed to	me): a	nd			
2. I an Ser	n not subject to backup withholding because: (a) I am exempt from ba vice (IRS) that I am subject to backup withholding as a result of a failu longer subject to backup withholding; and	ckup withholding, or (b)	l have r	not be	en no	tified I	by the	Interna	Reve	nue at I am	
3. I an	n 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 exem	pt from FATCA reportir	ig is con	ect.							
Certif	ication instructions. You must cross out item 2 above if you have been new failed to report all interest and dividends on your tax return. For real exition or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the certification,	otified by the IRS that you state transactions, item 2 ions to an individual retir	ou are cu does no ement a	rrently ot appl range	y. For ment i	moπg (IRA), i	jage int and gei	erest pa nerally,	aio, payme	ents	
Sign Here	1 O'B' 1 0 1 1 1 1 1		Date ►	1	1/1	3/2	2017	, 			
Ge	neral Instructions	• Form 1099-DIV (di funds)	vidends	, inclu	ding t	hose t	from st	ocks o	r mutu	al	

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-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.