

Maximum

| | | Rate | G | ross Wage Base | | Dollar Amount | | |
|----------------|-----------------------|---------------|----|----------------|------------|---------------|--|--|
| Employee Withh | nolding: | | | | | | | |
| | FICA/SS | 6.20% | \$ | 132,900 | \$ | 8,239.80 | | |
| | | 1.45% + | | | | | | |
| | | 0.9% above | | | | | | |
| | FICA/Medicare Portion | \$200,000 *** | | no limit | no maximum | | | |
| | SDI | 1.00% | \$ | 118,371 | \$ | 1,183.71 | | |
| Employer Tax: | | | | | | | | |
| | FICA/SS | 6.20% | \$ | 132,900 | \$ | 8,239.80 | | |
| | FICA/Medicare Portion | 1.45% | | no limit | no n | naximum | | |
| | FUTA | 0.60% * | \$ | 7,000 | \$ | 42 | | |
| | SUI | ** | \$ | 7,000 | | ** | | |
| | ETT | 0.10% | \$ | 7,000 | \$ | 7 | | |

Beginning January 1, 2018, ell employers are required to electronically file and pay California employment taxes.

Minimum wage: Effective January 1, 2019, the California minimum wage is \$11.00 per hour for employers with 25 employees or less and \$12.00 per hour for employers with 26 or more employees.

The Standard Mileage Rate for 2019 is 58 cents per mile driven for business use, up from 54.5 cents per mile for 2018.

Self Employment Tax is currently 12.4 % for Social Security self-employment taxes on self-employment income up to a maximum of \$132,900 through December 31, 2019. Medicare self-employment tax is currently 2.9% for all of 2019 with no maximum wage base. The Additional Medicare Tax also applies to self-employment income.

401(k): The 2019 limit for 401(k) pre-tax contributions and deferred compensation plans 403(b), 408(k)(6) and 457(b) is \$19,000. Individuals who are age 50 or over at the end of the calendar year can make annual catch up contributions of \$6,000. The contribution limit for SIMPLE plans is \$13,000 with a catch up amount of \$3,000.

The annual compensation limit for plans 401(k), 403(b), 408(k)(3)(C)(7) and SIMPLE 408(p) is \$280,000 for 2019.

- * The standard FUTA rate is 6.0% on the first \$7,000 of wages subject to FUTA. Generally, employers may receive a credit of 5.4% when they file their Form 940, to result in a net FUTA tax rate of 0.6%. The 0.6% rate assumes eligibility for the maximum credit for amounts paid into state unemployment funds. The credit may be reduced if a state has taken loans from the federal government to meet its state unemployment benefits liabilities and has not repaid the loans within the allowable time frame. For California employers in 2018, there was no credit reduction. Credit reduction rates by state are announced after November 10 each year and will be included on Schedule A of Form 940 for 2019 once those forms are available. If the employer's FUTA tax liability at the end of the quarter (plus any accumulated FUTA tax liability for prior quarters) is more than \$500, a quarterly deposit will be required. See the instructions to Form 940.
- ** Determined on an individual basis. New employers are assigned a 3.4 percent SUI rate.

*** For tax years beginning after December 31, 2012, an individual is liable for Additional Medicare Tax (HI) if their wages, compensation, or self-employment income (together with that of their spouse if filing a joint return) exceed the threshold amount for the individual's filing status:

| Filing Status | Thresho | Threshold Amount | | | |
|--|---------|------------------|--|--|--|
| Married filing jointly | \$ | 250,000 | | | |
| Married filing separately | \$ | 125,000 | | | |
| Single | \$ | 200,000 | | | |
| Head of household (with qualifying person) | \$ | 200,000 | | | |
| Qualifying widow(er) with dependent child | \$ | 200,000 | | | |

This means that the portion of wages received in excess of the above amounts will be subject to a 2.35% (1.45% + 0.9%) employee portion of the Medicare tax, and a total Medicare rate (employer and employee portions) of 3.8%. Unlike the general 1.45% Medicare tax on wages, the additional 0.9% tax is on the combined wages of the employee and the employee's spouse, in the case of a joint return.

An employer must withhold Additional Medicare Tax from wages paid to an individual in excess of \$200,000 in a calendar year, without regard to the individual's filing status, compensation paid by another employer and/or the amount of wages received by the employee's spouse.



Employee or Independent Contractor?

To determine if a worker is an employee or independent contractor complete the IRS' 20 Factors and the Additional California Factors that follow this page and enter the results below. Please note that the Federal and State may not arrive at the same determination. For example, a subcontractor may be an independent contractor according to the IRS' 20 factors but would not be considered an independent contractor if the answer to #7 on Additional California Factors is "no".

For assistance in answering these questions or determining the results please contact any of the professionals at Caliber Accounting & Tax, LLP.

The IRS' 20 Factors

"No" answers on questions 1 through 14, 19, and 20 and "yes" answers on question 15 through 18 support independent contractor status.

| independent contractor status. | T/DC | 210 |
|---|------|-----|
| | YES | NO |
| 1. Does the principal provide instructions to the worker about when, where, and how he or she is to perform the work? | | |
| 2. Does the principal provide training to the worker? | | |
| 3. Are the services provided by the worker integrated into the principal's business operations? | | |
| 4. Must the services be rendered personally by the worker? | | |
| 5. Does the principal hire, supervise, and pay assistants to the worker? | | |
| 6. Is there a continuing relationship between the principal and the worker? | | |
| 7. Does the principal set the work hours and schedule? | | |
| 8. Does the worker devote substantially full time to the business of the principal? | | |
| 9. Is the work performed on the principal's premises? | | |
| 10. Is the worker required to perform the services in an order or sequence set by the principal? | | |
| 11. Is the worker required to submit oral or written reports to the principal? | | |
| 12. Is the worker paid by the hour, week, or month? | | |
| 13. Does the principal pay the business or traveling expenses of the worker? | | |
| 14. Does the principal furnish significant tools, materials, and equipment? | | |
| 15. Does the worker have a significant investment in facilities? | | |
| 16. Can the worker realize a profit or loss as a result of his or her services? | | |
| 17. Does the worker provide services for more than one firm at a time? | | |

| | YES | NO |
|--|-----|----|
| 18. Does the worker make his or her services available to the general public? | | |
| 19. Does the principal have the right to discharge the worker at will? | | |
| 20. Can the worker terminate his or her relationship with the principal any time her or she wishes without incurring liability to the principal? | | |

Additional California Factors

"Yes" answers on questions 1 through 3 and "no" answers on questions 4 & 5 support independent contractor status. Questions 6 & 7 MUST have "yes" answers to be an independent contractor.

| | YES | NO |
|---|-----|----|
| 1. Is the worker engaged in a separately established occupation or business? | | |
| 2. In this locality, is the work usually done under the direction of the principal without supervision? | | |
| 3. Is skill required in performing the services and accomplishing the desired results? | | |
| 4. Does the principal have employees who do the same type of work? | | |
| 5. Did the worker previously perform the same or similar services for the principal as an employee? | | |
| 6. Do the parties believe they are creating an independent contractor relationship? | | |
| 7. Does the person have all required licenses (i.e., Contractor License) necessary to do the work? | | |

Recent Development:

The decision issued on April 30, 2018 by the California Supreme Court in the *Dynamex* case may futher impact the circumstances under which California businesses may classify workers as independent contractors rather than employees. The landmark decision articulated a new "ABC" test. Under the test, the business bears the burden of proving that the worker satisfies all of the following three tests:

- (A) The worker is free from control and direction of the hiring entity in connection with the performance of the work, both under the contract for performance of the work and in fact;
- (B) The worker performs work that is outisde the course of the hiring entity's business; and
- (C) The worker is customarily engaged in an independently established trade, occupation, or business.

Note that this new independent contractor test, the ABC Test, only applies to Industrial Welfare Commission wage orders. The California Supreme Court did not make any rulings about whether this test would also apply to other wage and hour laws. Although the EDD has not released a written statement, they have verbally announced that they will not change the way they do business as a result of the *Dynamex* case. Businesses should consult experienced counsel if uncertainties in classifying workers are present.



Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 08/31/2019

► START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

| Section 1. Employee Informati than the first day of employment, but | | | st complete an | d sign Se | ection 1 c | of Form I-9 no later | | |
|---|--------------------------------|---|-----------------|-----------|--------------------------------|-------------------------|--|--|
| Last Name (Family Name) | First Name (Given Nam | me) | Middle Initial | Other L | Other Last Names Used (if any) | | | |
| Address (Street Number and Name) | Apt. Number | City or Town | | | ZIP Code | | | |
| Date of Birth (mm/dd/yyyy) U.S. Social S | Security Number Empl | oyee's E-mail Addr | ress | E | mployee's | Telephone Number | | |
| I am aware that federal law provides connection with the completion of the | is form. | | | or use of | false do | cuments in | | |
| I attest, under penalty of perjury, that | I am (check one of the | following boxe | es): | | | | | |
| 1. A citizen of the United States | | | | | | | | |
| 2. A noncitizen national of the United Sta | ates (See instructions) | | | | | | | |
| 3. A lawful permanent resident (Alien | Registration Number/USCIS | S Number): | | | | | | |
| 4. An alien authorized to work until (ex | xpiration date, if applicable, | mm/dd/yyyy): | | | | | | |
| Some aliens may write "N/A" in the ex | xpiration date field. (See ins | structions) | | | | QR Code - Section 1 | | |
| Aliens authorized to work must provide onl An Alien Registration Number/USCIS Num | | | | | Do | Not Write In This Space | | |
| Alien Registration Number/USCIS Number/ | oer: | | _ | | | | | |
| 2. Form I-94 Admission Number: OR | | | _ | | | | | |
| Foreign Passport Number: Country of Issuance: | | | _ | | | | | |
| Signature of Employee | | | Today's Dat | e (mm/dd | //уууу) | | | |
| Preparer and/or Translator Cel I did not use a preparer or translator. (Fields below must be completed and s I attest, under penalty of perjury, that | A preparer(s) and/or tra | anslator(s) assisted and/or translators | assist an empl | oyee in c | completin | g Section 1.) | | |
| knowledge the information is true an | | oomplomon or e | | 10 101111 | and that | to the Boot of my | | |
| Signature of Preparer or Translator | | | | Today's [| Date (mm/ | dd/yyyy) | | |
| Last Name (Family Name) | | First Nam | ne (Given Name) | | | | | |
| Address (Street Number and Name) | | City or Town | | | State | ZIP Code | | |
| | | | | | | | | |

STOP

Employer Completes Next Page

STOR



Employment Eligibility Verification Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 08/31/2019

Section 2. Employer or Authorized Representative Review and Verification
(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You

| must physically examine one docum of Acceptable Documents.") | | | | | | | | | | om List C as listed on the "Lists |
|--|------------|---------------|---------------|---------------|----------------------|--------------|---------|------------|-----------|--|
| Employee Info from Section 1 | Last Nan | ne (Fam | ily Name) | | First Nam | ne (Given | Name |) N | 1.I. C | Citizenship/Immigration Status |
| List A Identity and Employment Auth | norization | OR | | Lis Ider | | | AN | D | E | List C mployment Authorization |
| Document Title | | | Document T | ïtle | | | | Documer | t Title | |
| Issuing Authority | | | ssuing Auth | ority | | | | Issuing A | uthority | |
| Document Number | | | Document N | lumber | | | | Documer | nt Numb | er |
| Expiration Date (if any)(mm/dd/yyyy | y) | | Expiration D | ate (if any)(| mm/dd/yyy | y) | | Expiration | n Date (| (if any)(mm/dd/yyyy) |
| Document Title | | | | | | | | | | |
| Issuing Authority | | | Additiona | I Information | on | | | | | QR Code - Sections 2 & 3 Do Not Write In This Space |
| Document Number | | | | | | | | | | |
| Expiration Date (if any)(mm/dd/yyyy | y) | | | | | | | | | |
| Document Title | | | | | | | | | | |
| Issuing Authority | | | | | | | | | | |
| Document Number | | | | | | | | | | |
| Expiration Date (if any)(mm/dd/yyyy | y) | | | | | | | | | |
| Certification: I attest, under pe (2) the above-listed document(s employee is authorized to work | s) appea | to be | genuine ar | | | | | | | |
| The employee's first day of e | mploym | ent <i>(m</i> | m/dd/yyyy | /): | | (S | ee ins | struction | s for e | exemptions) |
| Signature of Employer or Authorize | d Repres | entative | | Today's Da | ate(<i>mm/dd/</i>) | yyyy) | Title o | f Employe | r or Aut | horized Representative |
| Last Name of Employer or Authorized F | Representa | ative F | First Name of | Employer or | Authorized F | Representa | ative | Employe | r's Busii | ness or Organization Name |
| Employer's Business or Organization | on Addres | s (Stree | t Number a | nd Name) | City or To | own | | | State | ZIP Code |
| Section 3. Reverification a | and Re | hires (| To be com | pleted and | d signed b | y employ | er or | authorize | ed repr | esentative.) |
| A. New Name (if applicable) | | | | | | | Е | 3. Date of | Rehire | (if applicable) |
| Last Name (Family Name) | | First Na | me (Given I | Vame) | Mi | iddle Initia | ıl [| Date (mm/ | /dd/yyyy | <i>'</i>) |
| C. If the employee's previous grant continuing employment authorizatio | | | | | , provide th | e informa | tion fo | r the docu | ment or | receipt that establishes |
| Document Title | | | | Docum | ent Number | r | | | Expirati | on Date (if any) (mm/dd/yyyy) |
| I attest, under penalty of perjury | • | | - | | | - | | | | |
| Signature of Employer or Authorize | | | | Date (mm/ | | | | | | ed Representative |

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

| | LIST A Documents that Establish Both Identity and Employment Authorization | OR | LIST B Documents that Establish Identity AN | ID | LIST C Documents that Establish Employment Authorization |
|----|--|----|--|----|--|
| 2. | U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) | | 1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye | 1. | A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT |
| | Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa Employment Authorization Document | | color, and address 2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or | 2 | (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Contification of Digth Abroad issued |
| | that contains a photograph (Form I-766) | | information such as name, date of birth, gender, height, eye color, and address 3. School ID card with a photograph | | Certification of Birth Abroad issued by the Department of State (Form FS-545) Certification of Report of Birth |
| 5. | For a nonimmigrant alien authorized to work for a specific employer because of his or her status: | | Voter's registration card U.S. Military card or draft record | 3. | issued by the Department of State (Form DS-1350) |
| | a. Foreign passport; andb. Form I-94 or Form I-94A that has the following:(1) The same name as the passport; | | Military dependent's ID card U.S. Coast Guard Merchant Mariner Card | 4. | Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal |
| | and (2) An endorsement of the alien's | | 8. Native American tribal document | 5. | Native American tribal document |
| | nonimmigrant status as long as that period of endorsement has | | Driver's license issued by a Canadian government authority | 6. | U.S. Citizen ID Card (Form I-197) |
| | not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form. | | For persons under age 18 who are unable to present a document listed above: | 7. | Identification Card for Use of Resident Citizen in the United States (Form I-179) |
| 6. | Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI | | 10. School record or report card 11. Clinic, doctor, or hospital record 12. Day-care or nursery school record | 8. | Employment authorization document issued by the Department of Homeland Security |

Examples of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

INSTRUCTIONS FOR FORM 1-9 ARE AVAILABLE AT https://www.uscis.gov/i-9

Form I-9 11/14/2016 N Page 3 of 3

Form W-4 (2019)

Future developments. For the latest information about any future developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. You may claim exemption from withholding for 2019 if **both** of the following apply.

- For 2018 you had a right to a refund of **all** federal income tax withheld because you had **no** tax liability, **and**
- For 2019 you expect a refund of **all** federal income tax withheld because you expect to have **no** tax liability.

If you're exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2019 expires February 17, 2020. See Pub. 505, Tax Withholding and Estimated Tax, to learn more about whether you qualify for exemption from withholding.

General Instructions

If you aren't exempt, follow the rest of these instructions to determine the number of withholding allowances you should claim for withholding for 2019 and any additional amount of tax to have withheld. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

You can also use the calculator at **www.irs.gov/W4App** to determine your tax withholding more accurately. Consider

using this calculator if you have a more complicated tax situation, such as if you have a working spouse, more than one job, or a large amount of nonwage income not subject to withholding outside of your job. After your Form W-4 takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2019. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple jobs or working spouses. If you have more than one job at a time, or if you're married filing jointly and your spouse is also working, read all of the instructions including the instructions for the Two-Earners/Multiple Jobs Worksheet before beginning.

Nonwage income. If you have a large amount of nonwage income not subject to withholding, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. Or, you can use the Deductions, Adjustments, and Additional Income Worksheet on page 3 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your paycheck. If you have pension or annuity income, see Pub. 505 or use the calculator at www.irs.gov/W4App to find out if you should adjust your withholding on Form W-4 or W-4P.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions Personal Allowances Worksheet

Complete this worksheet on page 3 first to determine the number of withholding allowances to claim.

Line C. Head of household please note: Generally, you may claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Line E. Child tax credit. When you file your tax return, you may be eligible to claim a child tax credit for each of your eligible children. To qualify, the child must be under age 17 as of December 31, must be your dependent who lives with you for more than half the year, and must have a valid social security number. To learn more about this credit, see Pub. 972, Child Tax Credit. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your wages and other income, including income earned by a spouse if you are filing a joint return.

Line F. Credit for other dependents. When you file your tax return, you may be eligible to claim a credit for other dependents for whom a child tax credit can't be claimed, such as a qualifying child who doesn't meet the age or social security number requirement for the child tax credit, or a qualifying relative. To learn more about this credit, see Pub. 972. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total

| | | Separate nere and giv | e Form W-4 to your empi | oyer. Keep the works | sneet(s) for your reco | ras | |
|--|--|--|------------------------------|-------------------------------|-----------------------------|-----------------|----------------------------------|
| | W_4 | Employe | e's Withholding | g Allowance (| Certificate | | OMB No. 1545-0074 |
| Form Department of the Treasury Internal Revenue Service Whether you're entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS. | | | | | | | 2019 |
| 1 | Your first name a | and middle initial | Last name | | 2 You | r social sec | curity number |
| | Home address (r | number and street or rural route) | | 3 Single Ma | rried Married, but | withhold at | higher Single rate. |
| | | | | Note: If married filing sep | arately, check "Married, bu | t withhold at | higher Single rate." |
| | City or town, star | te, and ZIP code | | 4 If your last name di | ffers from that shown o | n your soci | al security card, |
| check here. You must call 800-772-1213 for a replacement card. | | | | | | ement card. 🕨 🗌 | |
| 5 | Total number | of allowances you're clair | ning (from the applicable | worksheet on the foll | owing pages) | : | 5 |
| 6 | Additional am | ount, if any, you want with | nheld from each payched | k | | [| 6 \$ |
| 7 | I claim exemp | otion from withholding for | 2019, and I certify that I n | neet both of the follo | wing conditions for e | xemption | |
| | Last year I h | nad a right to a refund of a | II federal income tax with | held because I had n | o tax liability, and | | |
| | • This year I e | expect a refund of all feder | ral income tax withheld be | ecause I expect to ha | ve no tax liability. | | |
| | If you meet b | oth conditions, write "Exer | mpt" here | | ▶ 7 | | |
| Under | penalties of per | jury, I declare that I have ex | amined this certificate and | , to the best of my kno | wledge and belief, it is | s true, corr | rect, and complete. |
| | Employee's signature (This form is not valid unless you sign it.) ▶ Date ▶ | | | | | | |
| 8 E | mployer's name ar | nd address (Employer: Complet f sending to State Directory of N | | IRS and complete | 9 First date of employment | | oyer identification per (EIN) |

Form W-4 (2019) Page **2**

income includes all of your wages and other income, including income earned by a spouse if you are filing a joint return.

Line G. Other credits. You may be able to reduce the tax withheld from your paycheck if you expect to claim other tax credits, such as tax credits for education (see Pub. 970). If you do so, your paycheck will be larger, but the amount of any refund that you receive when you file your tax return will be smaller. Follow the instructions for Worksheet 1-6 in Pub. 505 if you want to reduce your withholding to take these credits into account. Enter "-0-" on lines E and F if you use Worksheet 1-6.

Deductions, Adjustments, and Additional Income Worksheet

Complete this worksheet to determine if you're able to reduce the tax withheld from your paycheck to account for your itemized deductions and other adjustments to income, such as IRA contributions. If you do so, your refund at the end of the year will be smaller, but your paycheck will be larger. You're not required to complete this worksheet or reduce your withholding if you don't wish to do so.

You can also use this worksheet to figure out how much to increase the tax withheld from your paycheck if you have a large amount of nonwage income not subject to withholding, such as interest or dividends.

Another option is to take these items into account and make your withholding more accurate by using the calculator at www.irs.gov/W4App. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Two-Earners/Multiple Jobs Worksheet

Complete this worksheet if you have more than one job at a time or are married filing jointly and have a working spouse. If you don't complete this worksheet, you might have too little tax withheld. If so, you will owe tax when you file your tax return and might be subject to a penalty.

Figure the total number of allowances you're entitled to claim and any additional amount of tax to withhold on all jobs using worksheets from only one Form W-4. Claim all allowances on the W-4 that you or your spouse file for the highest paying job in your family and claim zero allowances on Forms W-4 filed for all other jobs. For example, if you earn \$60,000 per year and your spouse earns \$20,000, you should complete the worksheets to determine what to enter on lines 5 and 6 of your Form W-4, and your spouse should enter zero ("-0-") on lines 5 and 6 of his or her Form W-4. See Pub. 505 for details.

Another option is to use the calculator at www.irs.gov/W4App to make your withholding more accurate.

Tip: If you have a working spouse and your incomes are similar, you can check the "Married, but withhold at higher Single rate" box instead of using this worksheet. If you choose this option, then each spouse should fill out the Personal Allowances Worksheet and check the "Married, but withhold at higher Single rate" box on Form W-4, but only one spouse should claim any allowances for credits or fill out the Deductions, Adjustments, and Additional Income Worksheet.

Instructions for Employer

Employees, do not complete box 8, 9, or 10. Your employer will complete these boxes if necessary.

New hire reporting. Employers are required by law to report new employees to a designated State Directory of New Hires. Employers may use Form W-4, boxes 8, 9,

and 10 to comply with the new hire reporting requirement for a newly hired employee. A newly hired employee is an employee who hasn't previously been employed by the employer, or who was previously employed by the employer but has been separated from such prior employment for at least 60 consecutive days. Employers should contact the appropriate State Directory of New Hires to find out how to submit a copy of the completed Form W-4. For information and links to each designated State Directory of New Hires (including for U.S. territories), go to www.acf.hhs.gov/css/employers.

If an employer is sending a copy of Form W-4 to a designated State Directory of New Hires to comply with the new hire reporting requirement for a newly hired employee, complete boxes 8, 9, and 10 as follows.

Box 8. Enter the employer's name and address. If the employer is sending a copy of this form to a State Directory of New Hires, enter the address where child support agencies should send income withholding orders.

Box 9. If the employer is sending a copy of this form to a State Directory of New Hires, enter the employee's first date of employment, which is the date services for payment were first performed by the employee. If the employer rehired the employee after the employee had been separated from the employer's service for at least 60 days, enter the rehire date.

Box 10. Enter the employer's employer identification number (EIN).

Form W-4 (2019) Page **3**

| | | Personal Allowances Worksheet (Keep for your records.) | | | | |
|------|---|--|-------------|-------|-------|--|
| Α | Enter "1" for you | rself | | Α | | |
| В | Enter "1" if you | vill file as married filing jointly | | В | | |
| С | - | vill file as head of household | | С | | |
| | | You're single, or married filing separately, and have only one job; or |) | | | |
| D | | You're married filing jointly, have only one job, and your spouse doesn't work; or | } | D | | |
| | | Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less | i. J | | | |
| E | | See Pub. 972, Child Tax Credit, for more information. | | | | |
| | | ome will be less than \$71,201 (\$103,351 if married filing jointly), enter "4" for each eligible child ome will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "2" | | | | |
| | eligible child. | one will be norn \$71,201 to \$173,000 (\$100,001 to \$040,000 if married filling jointly), enter 2 | ioi eacii | | | |
| | 0 | ome will be from \$179,051 to \$200,000 (\$345,851 to \$400,000 if married filing jointly), enter "1 | " for | | | |
| | each eligible chi | d. | | | | |
| | If your total inc | ome will be higher than \$200,000 (\$400,000 if married filing jointly), enter "-0-" | | Ε | | |
| F | | dependents. See Pub. 972, Child Tax Credit, for more information. | | | | |
| | • | ome will be less than \$71,201 (\$103,351 if married filing jointly), enter "1" for each eligible dep | | | | |
| | | ome will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "1" | | y | | |
| | two dependents four dependents | (for example, "-0-" for one dependent, "1" if you have two or three dependents, and "2" if you | nave | | | |
| | | ome will be higher than \$179,050 (\$345,850 if married filing jointly), enter "-0-" | | _ | | |
| G | • | f you have other credits, see Worksheet 1-6 of Pub. 505 and enter the amount from that w | | ıt. | | |
| - | | Norksheet 1-6, enter "-0-" on lines E and F | | G | | |
| н | Add lines A thro | ugh G and enter the total here | > | н | | |
| | | | | | | |
| | | • If you plan to itemize or claim adjustments to income and want to reduce your withholding, o | | | | |
| | have a large amount of nonwage income not subject to withholding and want to increase your withholding see the Deductions, Adjustments, and Additional Income Worksheet below. | | | | | |
| | complete all worksheets | • If you have more than one job at a time or are married filing jointly and you and your spous work, and the combined earnings from all jobs exceed \$53,000 (\$24,450 if married filing jointly), s | | | | |
| | that apply. | ee the | | | | |
| | that apply. Two-Earners/Multiple Jobs Worksheet on page 4 to avoid having too little tax withheld. • If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form | | | | | |
| | ' | W-4 above. | | | | |
| | | Deductions, Adjustments, and Additional Income Worksheet | | | | |
| Note | | eet only if you plan to itemize deductions, claim certain adjustments to income, or have a large | amount | of no | nwage | |
| | • | ect to withholding. | | | | |
| 1 | | te of your 2019 itemized deductions. These include qualifying home mortgage interest, | | | | |
| | | butions, state and local taxes (up to \$10,000), and medical expenses in excess of 10% of e Pub. 505 for details | 1 \$ | | | |
| | • | 100 if you're married filing jointly or qualifying widow(er) | . <u> </u> | | | |
| 2 | | 350 if you're head of household | 2 \$ | | | |
| | \$12,2 | 200 if you're single or married filing separately | | | | |
| 3 | Subtract line 2 f | rom line 1. If zero or less, enter "-0-" | 3 \$ | | | |
| 4 | | te of your 2019 adjustments to income, qualified business income deduction, and any | | | | |
| | additional stand | ard deduction for age or blindness (see Pub. 505 for information about these items) | 4 \$ | | | |
| 5 | | 4 and enter the total | 5 \$ | | | |
| 6 | | e of your 2019 nonwage income not subject to withholding (such as dividends or interest). | 6 \$ | | | |
| 7 | | rom line 5. If zero, enter "-0-". If less than zero, enter the amount in parentheses | 7 \$ | | | |
| 8 | Drop any fractio | Int on line 7 by \$4,200 and enter the result here. If a negative amount, enter in parentheses. | 8 | | | |
| 9 | | r from the Personal Allowances Worksheet, line H, above | 。 9 | | | |
| 10 | | 9 and enter the total here. If zero or less, enter "-0-". If you plan to use the Two-Earners / | · — | | | |
| | Multiple Jobs V | Vorksheet, also enter this total on line 1 of that worksheet on page 4. Otherwise, stop here | | | | |
| | | tal on Form W-4, line 5, page 1 | 10 | | | |

Form W-4 (2019) Page $oldsymbol{4}$

| | Two-Earners/Multiple Jobs Worksheet | | | | | |
|-------|--|------|----|--|--|--|
| Note: | Use this worksheet only if the instructions under line H from the Personal Allowances Worksheet direct you have | ere. | | | | |
| | Enter the number from the Personal Allowances Worksheet, line H, page 3 (or, if you used the Deductions, Adjustments, and Additional Income Worksheet on page 3, the number from line 10 of that worksheet) | 1 | | | | |
| | Find the number in Table 1 below that applies to the LOWEST paying job and enter it here. However, if you're married filing jointly and wages from the highest paying job are \$75,000 or less and the combined wages for you and your spouse are \$107,000 or less, don't enter more than "3" | 2 | | | | |
| | If line 1 is more than or equal to line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4, line 5, page 1. Do not use the rest of this worksheet | 3 | | | | |
| | If line 1 is less than line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill. | | | | | |
| 5 | Enter the number from line 2 of this worksheet | 6 | | | | |
| | Find the amount in Table 2 below that applies to the HIGHEST paying job and enter it here | 7 | \$ | | | |
| 8 | Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed | 8 | \$ | | | |
| | Divide line 8 by the number of pay periods remaining in 2019. For example, divide by 18 if you're paid every 2 weeks and you complete this form on a date in late April when there are 18 pay periods remaining in 2019. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck | 9 | \$ | | | |
| | Table 4 | | | | | |

| Married Filing Jointly All Others Married Filing Jointly If wages from LOWEST paying job are— Enter on line 2 above If wages from LOWEST paying job are— Enter on line 2 above If wages from HIGHEST paying job are— \$0 - \$5,000 0 \$0 - \$7,000 0 \$0 - \$24,900 5,001 - 9,500 1 7,001 - 13,000 1 24,901 - 84,450 9,501 - 19,500 2 13,001 - 27,500 2 84,451 - 173,900 | Enter on line 7 above \$420 500 | If wages from HIGHEST paying job are— | Enter on line 7 above |
|--|---|---|---|
| paying job are— line 2 above paying job are— line 2 above paying job are— \$0 - \$5,000 0 \$0 - \$7,000 0 \$0 - \$24,900 5,001 - 9,500 1 7,001 - 13,000 1 24,901 - 84,450 9,501 - 19,500 2 13,001 - 27,500 2 84,451 - 173,900 | line 7 above \$420 | paying job are- | |
| 5,001 - 9,500 1 7,001 - 13,000 1 24,901 - 84,450 9,501 - 19,500 2 13,001 - 27,500 2 84,451 - 173,900 | | \$0 - \$7 200 | |
| 19,501 - 35,000 | 910 1,000 1,330 1,450 1,540 | 7,201 - 36,975 36,976 - 81,700 81,701 - 158,225 158,226 - 201,600 201,601 - 507,800 507,801 and over | \$420 500 910 1,000 1,330 1,450 1,540 |

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to

cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You aren't required to provide the information requested on a form that's subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating

to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.



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; do not leave this line blank. | |
|---|--|---|
| | 2 Business name/disregarded entity name, if different from above | |
| 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. ☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): 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. | Exemption from FATCA reporting code (if any) |
| či | Other (see instructions) ▶ | (Applies to accounts maintained outside the U.S.) |
| See Spe | | and address (optional) |
| й | 6 City, state, and ZIP code | |
| | 7 List account number(s) here (optional) | |
| Pai | | |
| backı reside | your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid p withholding. For individuals, this is generally your social security number (SSN). However, for a nt alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other s, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i> | |
| TIN, I | | |
| | in the decedant le in more than one harne, eee the metractions for into 117 ties eee 177 at 7 and and | r identification number |
| Numb | er To Give the Requester for guidelines on whose number to enter. | - |
| Par | Certification | |
| Unde | penalties of perjury, I certify that: | |
| 2. I ar Sei | number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be is not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been rivice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (conger subject to backup withholding; and | notified by the Internal Revenue |
| 3. I ar | a U.S. citizen or other U.S. person (defined below); and | |
| 4. The | FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. | |
| Certif | cation instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently sub | niect 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.

Sign 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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