Instructions
Sections 1, 2, 3 (Name (Print) and Title) and 4 must be filled out electronically. Fill out by clicking on the fill in the blanks and type in the information. Section 3: Signature of a U.S. Person and Date must be hand-written. The form will be rejected if not filled out correctly.

Return completed form to U.S. Bank New Vendor Set-up via e-mail or US Postal Mail as indicated on the instruction page.

Vendor Number:

| | Must be con | npietea ana returnea | for payments to be processed . |
|--|--|--|--|
| 1 Name (as shown on your income tax return) | | | |
| 2 Business name/disregarded entity, if different | t from above | | |
| 3 Address | City | State | ZIP |
| 4 Payment Remittance Address | City | State | ZIP |
| 5 Phone 6 Email | TIN Type (Che ☐ Social Secu | ırity Number 🔲 Employei | |
| 8 Federal Tax Classification ☐ Individual/Sole Proprietorship or singlemember LLC ☐ C Corporation | ☐ S Corporation ☐ Partnership ☐ Trust/Estate ☐ Other, please specify _ | 10 Exemptions Exempt payee Exemption from (Applies to ac | code (if any) n FATCA reporting code (if any) counts maintained outside the U.S.) |
| 9 Limited liability company. Enter the tax classic Reference Section 1: W-9 Information for details. | | | ship) |
| entries to my (our) account indicated below and to such account. E-mail address1 (to receive electronic remittand Checking Account Information (Please attack) | ce advices) E-m | ail address2 | |
| | | roncok with whom soung) | |
| Routing/ABA Number Account Number | r Bank Name | Branch | |
| Routing/ABA Number City Check this box if you are interested in the This authority is to remain in full force and effect and in such manner as to afford COMPANY and | ZIP e virtual credit card option. t until COMPANY has receiv | Branch Phone ed written notification from | |
| City State Check this box if you are interested in the This authority is to remain in full force and effect and in such manner as to afford COMPANY and Section 3: Certification Under penalties of perjury, I certify that: 1. The number show on this form is my 2. I am not subject to back up withholding the content of the | ZIP e virtual credit card option. t until COMPANY has receiv d DEPOSITORY a reasonab correct taxpayer identification ng because: (a) I am exempt am subject to backup withhole | Branch Phone ed written notification from ly opportunity to act on it. In number (or I am waiting from backup withholding, olding as a result of a failur | n me (us) of its termination in such time |
| City State Check this box if you are interested in the This authority is to remain in full force and effect and in such manner as to afford COMPANY and Section 3: Certification Under penalties of perjury, I certify that: 1. The number show on this form is my 2. I am not subject to back up withholding Internal Revenue Service (IRS) that I (c) the IRS has notified me that I am 3. I am a U.S. citizen or other U.S. pers | e virtual credit card option. It until COMPANY has received DEPOSITORY a reasonable correct taxpayer identification and because: (a) I am exempt I am subject to backup withhou longer subject to backup on; and | Branch Phone ed written notification from ly opportunity to act on it. In number (or I am waiting from backup withholding, olding as a result of a failur withholding; and | for a number to be issued to me); and or (b) I have not been notified by the re to report all interest or dividends, or |
| City State Check this box if you are interested in the This authority is to remain in full force and effect and in such manner as to afford COMPANY and Section 3: Certification Under penalties of perjury, I certify that: 1. The number show on this form is my 2. I am not subject to back up withholding Internal Revenue Service (IRS) that I (c) the IRS has notified me that I am | e virtual credit card option. It until COMPANY has received DEPOSITORY a reasonable correct taxpayer identification in the process of the pro | Branch Phone ed written notification from ly opportunity to act on it. In number (or I am waiting from backup withholding, olding as a result of a failur withholding; and am exempt from FATCA resen notified by the IRS that our tax return. For real est, cancellation of debt, controls, you are not required to this document other than the spolicy does not accept were accept within the spolicy does not accept within the spolicy does not accept were a | for a number to be issued to me); and or (b) I have not been notified by the re to report all interest or dividends, or exporting is correct. It you are currently subject to backup tate transactions, item 2 does not apply. I ributions to an individual retirement to sign the Certification, but you must be certifications required to avoid backup V-9 forms with electronic signatures, |
| City State Check this box if you are interested in the This authority is to remain in full force and effect and in such manner as to afford COMPANY and Section 3: Certification Under penalties of perjury, I certify that: 1. The number show on this form is my 2. I am not subject to back up withholding Internal Revenue Service (IRS) that I (c) the IRS has notified me that I am 3. I am a U.S. citizen or other U.S. pers 4. The FACTA code(s) entered on this form the factor of the IRS has notified me that I am Certification instructions: You must cross outhholding because you have failed to report a For mortgage interest paid, acquisition or abandarrangement (IRA), and, generally, payments of provide your correct TIN. The Internal Revenue Service does not require you withholding. An ink signature is required for this forms. | e virtual credit card option. It until COMPANY has received DEPOSITORY a reasonabe correct taxpayer identification in the process of the proc | Branch Phone ed written notification from ly opportunity to act on it. In number (or I am waiting from backup withholding, olding as a result of a failur withholding; and am exempt from FATCA reseen notified by the IRS that our tax return. For real est, cancellation of debt, contax, you are not required to this document other than the last policy does not accept we sign with an ink signature. | for a number to be issued to me); and or (b) I have not been notified by the re to report all interest or dividends, or exporting is correct. It you are currently subject to backup tate transactions, item 2 does not apply. Initiations to an individual retirement to sign the Certification, but you must be certifications required to avoid backup V-9 forms with electronic signatures, below. |

U.S. Bank W-9 & Related Information

Section 4: MWBEs, DVBEs & DOBEs

Minority and Women Owned Business Enterprises (MWBE) - U. S. Bank is committed to building relationships with certified MWBEs, defined as companies that are at least 51 percent owned, controlled and managed by one or more of the following categories - African American, Hispanic American, Asian Pacific American, Asian Indian American, Native American, Woman. Please include a copy of certification.

Disabled Veteran Business Enterprise (DVBE) - The law defines a disabled veteran as a United States military, naval or air service veteran with a service related disability of at least 10 percent. Please include a copy of certification.

Disabled Owned Business Enterprise (DOBE) - A disabled-owned business is a business that is at least 51 percent owned, controlled and operated by an individual or individuals who are disabled. Please include a copy of certification.

| Section 4: MWBE, DVBE & DOBE Is your company certified as a minority/ woman owned business? No Yes (if yes, a copy of your minority/woman owned certification MUST BE INCLUDED) | | | | |
|---|--|---------------------------|--|--|
| MWBE Business Status (check all that apply ☐ African American ☐ Hispanic American | r): Asian Pacific American Asian Indian American | ☐ Native American ☐ Woman | | |
| Is your company certified as a Disabled Veteran Business Enterprise? ☐ No ☐ Yes (if yes, a copy of your DVBE certification MUST BE INCLUDED) | | | | |
| Is your company certified as a Disabled Owned Business Enterprise? No Yes (if yes, a copy of your DOBE certification MUST BE INCLUDED) | | | | |
| This will certify to U.S. Bank that I have read the requirements cited on this form, and the company classification(s) I have selected above are true and correct. I will advise U.S. Bank if our classification should change. | | | | |

U.S. Bank W-9 & Related Information

Form instructions



Vendor Number: To be completed by U.S. Bank's Corporate Payables department.

Section 1: W-9 information

U.S. Bank requires your taxpayer identification number (TIN) to report on an information return the amount paid to you, or other income reportable on an information return. Please complete Section 1 in its entirety. A federal tax classification *must* be selected. If exemptions from backup withholding (exempt payee codes) or Foreign Account Tax Compliance Act (FATCA) reporting (FATCA reporting codes) apply to you, please ensure that the exemption code is entered. The FATCA reporting code is only for vendor invoices originated outside the U.S.

Exempt payee codes:

- 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 possession of the United States, 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, District of Columbia, or a possession of the United States
- 7 A futures in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 8 A real estate investment trust
- $9-\mbox{An}$ entity registered at all times during the tax year under the investment Company Act of 1940
- 10 A common trust 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

Exemption from FATCA reporting 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 ta 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

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.

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. For a single-member owner, check the appropriate box 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 or the tax classification of its owner.

| the appropriate box of the tax classification of its owner. | | |
|--|--|--|
| If the entity/person on line 1 is a(n) | THEN check the box for | |
| Corporation | Corporation | |
| Individual | Individual/sole proprietor or single-member LLC | |
| Sole proprietorship, or | | |
| Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes. | | |
| 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 | Limited liability company and enter the appropriate tax classification (P=Partnership; C= C corporation; or S= S | |
| 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. | corporation) | |
| Partnership | Partnership | |
| Trust/estate | Trust/estate | |

Section 2: Payment Options

ACH, will allow U.S. Bank to pay you (vendor) through an automated electronic deposit into your preferred checking/savings account. *Please acquire your routing number and account number from a check (not from a deposit slip)*. A virtual credit card options is also available should you already be a Visa accepter. A remittance advice detailing the invoice number(s), date and dollar amount will be sent to you via e-mail (if provided) or by mail when the electronic payment has been sent to your account. If you are interested in the virtual credit card, contact us for more information at corporatepayablesnewvendorgroup@usbank.com.

Submission

Please submit the completed form to Corporate Payables New Vendor Group. U.S. Bank will not process pending invoices or Expense Check Requisitions without a properly completed W-9 form on file.

E-mail CorporatePayablesNewVendorGroup@usbank.com

