Form **W-9** (Rev. November 2017)

(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; do not leave this line blank.	* V	0.000					100				
Print or type. See Specific Instructions on page 3.	FLORIDA POLYGRAPH ASSOCIATION, INC											
	2 Business name/disregarded entity name, if different from above											
									2			
						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC				istru	ctions	n paç	e 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)							
	✓ Other (see instructions) ► 501c6			(A	pplies	to accour	ts main	ained outs	de the	U.S.)		
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)										
	P. O. BOX 530279											
	6 City, state, and ZIP code											
	DEBARY FL 32753-0279											
	7 List account number(s) here (optional)											
Pa		10										
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a					curity number							
resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other					-		-					
	es, it is your employer identification number (EIN). If you do not have a number, see How to get a	Ш					L					
T/N, later. Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Empl				mployer identification number								
Number To Give the Requester for guidelines on whose number to enter.												
		4	5	-	2	4 6	9	5 () 2			
Par	t II Certification	-										
Unde	r penalties of perjury, I certify that:											
1. Th	e number shown on this form is my correct taxpayer identification number (or I am waiting for a numb	er to	be is	ssue	ed to	me);	and					
Se	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have vice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or divide longer subject to backup withholding; and											
3. I a	n a U.S. citizen or other U.S. person (defined below); and											
4. Th	e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is cor	rect.										
you h acqui	ication instructions. You must cross out item 2 above if you have been notified by the IRS that you are co ave failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does n sition or abandonment of secured property, cancellation of debt, contributions to an individual retirement a than interest and dividends, you are not required to sign the pertification, but you must provide your correc	ot ap	ply. I geme	or r	mort RA),	gage in and g	nteres enera	t paid, lly, pay	ment	s		
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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.



State of Florida

Chief Financial Officer Department of Financial Services Bureau of Accounting 200 East Gaines Street Tallahassee, FL 32399-0354

Telephone: (850) 413-5519 Fax:(850) 413-5550

Substitute Form W-9

In order to comply with Internal Revenue Service (IRS) regulations, we require Taxpayer Identification information that will be used to determine whether you will receive a Form 1099 for payment(s) made to you by an agency of the State of Florida, and whether payments are subject to Federal withholding. The information provided below must match the information that you provide to the IRS for income tax reporting. Federal law requires the State of Florida to take backup withholding from certain future payments if you fail to provide the information requested.

Taxpayer Identification Number (FEIN): 45-2469502 IRS Name: FLORIDA POLYGRAPH ASSOCIATION

Address:

P. O. BOX 530279 DEBARY, FL 32753-0279

Attention Of: JOHN THORPE

In Care Of: FPA

Business Designation: Not For Profit

Certification Statement:

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer information AND
- 2. I am not subject to backup withholding because:

 - (a) I am exempt from backup withholding **or**(b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends, or
 - (c) the IRS has notified me that I am no longer subject to backup withholding AND
- 3. I am a U.S. citizen or other U.S. person (including U.S. resident alien)

Preparer's Name: JOHN THORPE Preparer's Title: TREASURER

Phone: 386-668-6236 Email: Ltthorpe@iag.net

Date Submitted: 06/12/2011

Active Doing Business As names submitted on the Substitute Form W-9:

FLORIDA POLYGRAPH ASSOCIATION