Form W-9 (Rev. March 2024) 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.

Before you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.												
	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)											
	Business name/disregarded entity name, if different from above. California FCCLA											
Print or type. See Specific Instructions on page 3.	only one of the following seven boxes. Individual/sole proprietor					Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
	LLC. Enter the tax classification (C = C corporation, S = S corporation, P ≈ Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. Other (see instructions) 501(c)3 - Non-profit Corporation					Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)						
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions	classification, terest, check (Applies to accounts maintained										
	5 Address (number, street, and apt. or suite no.). See instructions. PO Box 6	ster's name and address (optional)										
	6 City, state, and ZIP code Galt, CA 95632											
	7 List account number(s) here (optional)		<u>.</u>					_				
Par	Taxpayer Identification Number (TIN)							_				
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid Social security number												
	up withholding. For individuals, this is generally your social security number (SSN). However, for a		_		_							
	ent 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 <i>How to get a</i>				J		$oxed{oxed}$	Ш				
TIN, la	later.											
Employer						identification number						
Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.					1	4 3	1					
Par	t II Certification											
Unde	or penalties of perjury, I certify that:											
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); 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 a 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 (defined below); and												
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.												
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.												
Sign Here		-14	5-	202	2-5	-						

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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

2025 Withholding Exemption Certificate

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The	e payee completes this form and submits it to the withholding agent. The withholding age	nt keeps this t	form with their records.						
	thholding Agent Information								
Nan	ne								
Pay	yee Information		_						
Nan	ne	SSN or ITIN	TIN P FEIN CA Corp no. CA SOS file no.						
Ca	alifornia FCCLA	94-609143	1431						
Add	iress (apt/ste., room)								
	D Box 6								
	(If you have a foreign address, see instructions.)		tate ZIP code						
G		CA	CA 95632						
	emption Reason .								
	eck only one box.	u							
req	checking the appropriate box below, the payee certifies the reason for the exemption from turing the companion of the exemption from the exemption	ine California	income tax withholding						
	Individuals — Certification of Residency: I am a resident of California and I reside at the address shown above. If I become a notify the withholding agent. See instructions for General Information D, Definitions,	onresident at	any time, I will promptly						
	Corporations: The corporation has a permanent place of business in California at the address shown above or is qualified through the California Secretary of State (SOS) to do business in California. The corporation will file a California tax return. If this corporation ceases to have a permanent place of business in California or ceases to do any of the above, I will promptly notify								
_	the withholding agent. See instructions for General Information D, Definitions.	•							
Ц	Partnerships or Limited Liability Companies (LLCs): The partnership or LLC has a permanent place of business in California at the address shown above or is registered with the California SOS, and is subject to the laws of California. The partnership or LLC will file a California tax return. If the partnership or LLC ceases to do any of the above, I will promptly inform the withholding agent. For withholding purposes, a limited liability partnership (LLP) is treated like any other partnership.								
	Tax-Exempt Entitles: The entity is exempt from tax under California Revenue and Taxation Code (R&TC) Section 23701 (insert letter) or Internal Revenue Code Section 501(c) 3 (insert number). If this entity ceases to be exempt from tax, I will promptly notify the withholding agent. Individuals cannot be tax-exempt entities.								
	insurance Companies, Individual Retirement Arrangements (IRAs), or Qualified Pension/Profit-Sharing Plans: The entity is an insurance company, IRA, or a federally qualified pension or profit-sharing plan.								
	California Trusts: At least one trustee and one noncontingent beneficiary of the above-named trust is a California resident. The trust will file a California fiduciary tax return. If the trustee or noncontingent beneficiary becomes a nonresident at any time, I will promptly notify the withholding agent.								
	Estates — Certification of Residency of Deceased Person: I am the executor of the above-named person's estate or trust. The decedent was a C The estate will file a California fiduciary tax return.	a California resident at the time of death.							
	onmilitary Spouse of a Military Servicemember: I am a nonmilitary spouse of a military servicemember and I meet the Military Spouse Residency Relief Act (MSRRA) requirements. See instructions for General Information E, MSRRA.								
CE	RTIFICATE OF PAYEE: Payee must complete and sign below.								
or g	r privacy notice can be found in annual tax booklets or online. Go to ftb.ca.gov/privacy to logo to ftb.ca.gov/forms and search for 1131 to locate FTB 1131 EN-SP, Franchise Tax Boards notice by mail, call 800.338.0505 and enter form code 948 when instructed.	earn about ou I Privacy Notic	r privacy policy statement, ce on Collection. To request						
stat	der penalties of perjury, I declare that I have examined the information on this form, includin tements, and to the best of my knowledge and belief, it is true, correct, and complete. I furthe facts upon which this form are based change, I will promptly notify the withholding agent.	ner declare un	der penalties of perjury that						
Typ	be or print payee's name and title Maria Freitas, Financial Services Director		Telephone (209) 744-1979						
Pay	pe or print payee's name and title Maria Freitas, Financial Services Director yee's signature	Date	Date 01/15/2025						
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