## (Rev. March 2024) Department of the Treasury Internal Revenue Service

What's New

## 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.

Befor	e you begin. For guidance related to the purpose of Form W-9, see	Purpose of Form, below.		
	<ol> <li>Name of antity/individual. An entry is required. (For a sole proprietor or centity's name on line 2.)</li> </ol>	disregarded entity, enter the ov	wner's name on line	a 1, and enter the business/disregarded
Print ortype. See Specific instructions on page 3.	SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY			
	2 Business name/disregarded entity name, if different from above.			- 30
	RIVER PEOPLE HEALTH CENTER			
				4 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)		Exempt payee code (if any) 1	
	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.		Exemption from Foreign Account Tax Compliance Act (FATCA) reporting	
	☑ Other (see instructions) NATIVE AMERICAN TRIBAL GOVERNMENT		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			(Applies to accounts maintained outside the United States.)
	5 Address (number, street, and apt. or suite no.). See instructions.	THE STATE OF THE S	Requester's name	and address (optional)
	10005 E OSBORN RD		600	2.5
	6 City, state, and ZIP code			
	SCOTTSDALE, AZ 85256-4019			
	7 List account number(s) here (optional)	,	5	3.
Pai	Taxpayer Identification Number (TIN)			350
reside entitie TIN, la	up withholding. For individuals, this is generally your social security rent alien, sole proprietor, or disregarded entity, see the instructions fas, it is your employer identification number (EIN). If you do not have after. If the account is in more than one name, see the instructions for line.	or Part I, later. For other a number, see How to get	or Employe	r identification number
Numb	er To Give the Requester for guidelines on whose number to enter.		8 6	- 0 1 4 3 7 8 7
Par	Certification			
Unde	r penalties of perjury, I certify that:			
2. I ar Ser no	e number shown on this form is my correct taxpayer identification nument of subject to backup withholding because (a) I am exempt from bevice (IRS) that I am subject to backup withholding as a result of a fallonger subject to backup withholding; and na U.S. citizen or other U.S. person (defined below); and	backup withholding, or (b)	have not been r	notified by the Internal Revenue
4. The	FATCA code(s) entered on this form (if any) indicating that I am exe	empt from FATCA reporting	g is correct.	
becau acqui	ication instructions. You must cross out item 2 above if you have bee se you have failed to report all interest and dividends on your tax retun sition or abandonment of secured property, cancellation of debt, contri	n. For real estate transactio butions to an individual reti	ns, item 2 does n rement arrangem	ot apply. For mortgage interest paid, ent (IRA), and, generally, payments
other	than interest and dividends, you are not required to sign the certification	n, but you must provide yo	ur correct TIN. Se	e the instructions for Part II, later.
Sign Here		D	<sub>ate</sub> Jul 3, 202	24
General Instructions Section references are to the Internal Revenue Code unless otherwise noted. Future developments. For the latest information about developments		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		
relate	d to Form W-9 and its instructions, such as legislation enacted hey were published, go to www.irs.gov/FormW9.			eign partners, owners, or y 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). 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.

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