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

Request for Taxpayer Identification Number and Certification

requester. Do not send to the IRS.

Give Form to the

					-						_
	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the entity's name on line 2.)	e owner's	name	on line	e 1, an	id en	ter the	e bus	ness/di	sregarde	∌d
	ACCO Brands Corporation										
	2 Business name/disregarded entity name, if different from above										_
	ACCO Brands USA LLC										
page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes.	d on line 1	. Che			n enti	ities, i	not in	apply o	,	
0 0	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ T single-member LLC	Γrust/estat	te		iiisii ut	Juoris	s on p	aye ()).		
Print or type : Instructions	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Part	ا (tnership		_	Exem	pt pa	уее с	ode (f any)	5	-
Print or type Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member ow LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the canother LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a sing that is disregarded from the owner should check the appropriate box for the tax classification of its canonic process.	owner of t gle-membe	he LL	C is	Exem _l (if any			FATC	A repoi D	ting code	e
See S	☐ Other (see instructions) ►			1	Applies	to acco	ounts m	aintaine	ed outside	the U.S.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its and you are providing this form to a partnership, trust, or estate in which you have an ownership inter box if you have any foreign partners, owners, or beneficiaries. See instructions	rest, chec	k this	_							
		Requeste			d addr	ess (option	nal)			_
	Four Corporate Drive					(,			
	6 City, state, and ZIP code										
	Lake Zurich, IL 60047										
	7 List account number(s) here (optional)										
											_
Part			_								_
	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo withholding. For individuals, this is generally your social security number (SSN). However, for		Soc	ial se	urity	nui	mber				ᆜ
esider	t alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other				_			-			
ntities IN, lat	, it is your employer identification number (EIN). If you do not have a number, see How to get	а			╛			L			╝
11 4 , 14t	J.	9	or								
	f the account is in more than one name, see the instructions for line 1. Also see What Name a	and	Em	ployer	iden	tific	ation	nur	nber		
lumbe	r To Give the Requester for guidelines on whose number to enter.	ĺ				Ι_					
			3	6 -	2	7	0	4	0 1	7	
Part	Certification				•				•		_
Jnder	penalties of perjury, I certify that:										
. The	number shown on this form is my correct taxpayer identification number (or I am waiting for a	a number	to be	e issue	d to n	ne); a	and				
(IRS	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) that I am subject to backup withholding as a result of a failure to report all interest or divider ect to backup withholding; and										е
. I am	a U.S. citizen or other U.S. person (defined below); and										
. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportin	ig is corre	ect.								
	cation instructions. You must cross out item 2 above if you have been notified by the IRS th	ŭ		rrently	subie	ect to	hacl	ıın v	/ithhol	dina	
ecaus aid, a	e you have failed to report all interest and dividends on your tax return. For real estate transa equisition or abandonment of secured property, cancellation of debt, contributions to an indivi nts other than interest and dividends, you are not required to sign the certification, but you mu	actions, i idual retii	tem 2 reme	2 does nt arra	not a ngem	pply. ent (For	morte and	gage ir genera	iterest ally,	
Sign	Signature of										

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	-			
	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the own entity's name on line 2.)	er's name on li	ne 1, and enter the busi	ness/disregarded
	Blick Art Materials LLC			
	2 Business name/disregarded entity name, if different from above			
	Blick Art Materials			
page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered on lonly one of the following seven boxes.	ine 1. Check	4 Exemptions (codes certain entities, not inc	dividuals; see
0 0	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/single-member LLC	estate	instructions on page 3)).
or typ uctio	☑ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partners	nip) ► S	Exempt payee code (i	f any) 5
Print or type See Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	r of the LLC is ember LLC	Exemption from FATC (if any)	A reporting code
See S	☐ Other (see instructions) ►		(Applies to accounts maintaine	ed outside the U.S.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, you have any foreign partners, owners, or beneficiaries. See instructions	check this		
	5 Address (number, street, and apt. or suite no.) See instructions. PO Box 1267	ıester's name a	nd address (optional)	
ŀ	6 City, state, and ZIP code			
	Galesburg, IL 61422			
	7 List account number(s) here (optional)			
Part	Taxpayer Identification Number (TIN)			
	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid	Social s	ecurity number	
	withholding. For individuals, this is generally your social security number (SSN). However, for a alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other			
entities,	it is your employer identification number (EIN). If you do not have a number, see How to get a			
ΓIN, late	r.	or		
Note: If	the account is in more than one name, see the instructions for line 1. Also see What Name and		er identification nun	nber
Number	To Give the Requester for guidelines on whose number to enter.			
		4 6	- 3 7 5 6	1 3 2
Part I	Certification			
Jnder p	enalties of perjury, I certify that:			_
•	number shown on this form is my correct taxpayer identification number (or I am waiting for a nur	nber to be issu	ied to me): and	
(IRS	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have that I am subject to backup withholding as a result of a failure to report all interest or dividends, sect to backup withholding; and			
•	a U.S. citizen or other U.S. person (defined below); and			
I. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is	correct.		
	ation instructions. You must cross out item 2 above if you have been notified by the IRS that ye you have failed to report all interest and dividends on your tax return. For real estate transaction	ns, item 2 doe	s not apply. For morto	gage interest
pecause paid, ac paymen	quisition or abandonment of secured property, cancellation of debt, contributions to an individual ts other than interest and dividends, you are not required to sign the certification, but you must pater.			
ecause paid, ac	ts other than interest and dividends, you are not required to sign the certification, but you must p			

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	T Name of entity/individual. An entity is required. (For a sole proprietor or disregarded entity, enter trentity's name on line 2.)	ne owner s	name	OH IIII	e i, an	a ente	rine	busii	iess/uis	regarded
	Varsity Brands Holding Co., Inc. 2 Business name/disregarded entity name, if different from above									
	BSN Sports, LLC									
on page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes.	ed on line 1				entitie	es, no	ot ind	apply or ividuals	,
ns o	single-member LLC									
Print or type c Instructions	■ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Pa	artnership)	<u> </u>	_	Exemp	ot paye	e co	de (if	any)	
Print or type See Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a sin that is disregarded from the owner should check the appropriate box for the tax classification of its	e owner of t	the LL	C is	Exemp		om F	ATC	A reporti	ng code
See Sp					(Applies	to accour	nts mai	ntaine	d outside the	ne U.S.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as it and you are providing this form to a partnership, trust, or estate in which you have an ownership into box if you have any foreign partners, owners, or beneficiaries. See instructions	erest, chec	k this							
	5 Address (number, street, and apt. or suite no.) See instructions.	Requeste	er's na	me an	d addr	ess (or	otiona	al)		
	PO Box 7726 6 City, state, and ZIP code	4								
	Dallas, TX 75209									
	7 List account number(s) here (optional)	1								
Part	Taxpayer Identification Number (TIN)									
Enter y	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		Soc	ial se	curity	num	ber			
esiden entities	withholding. For individuals, this is generally your social security number (SSN). However, for talien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other, it is your employer identification number (EIN). If you do not have a number, see How to ge				-			-		
ΓIN, late	er.		or							
	f the account is in more than one name, see the instructions for line 1. Also see What Name	and	Em	oloyeı	iden	tificat	ion	num	ber	
Numbe	r To Give the Requester for guidelines on whose number to enter.		4	7 -	. 2	4	6	0	2 7	2
Part	Certification									
Jnder i	penalties of perjury, I certify that:									
I. The	number shown on this form is my correct taxpayer identification number (or I am waiting for	a number	to be	issue	d to m	ne); an	ıd			
(IRS	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) that I am subject to backup withholding as a result of a failure to report all interest or divide ect to backup withholding; and									
3. Iam	a U.S. citizen or other U.S. person (defined below); and									
I. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporti	ing is corre	ect.							
ecaus paid, a	cation instructions. You must cross out item 2 above if you have been notified by the IRS e you have failed to report all interest and dividends on your tax return. For real estate transcruisition or abandonment of secured property, cancellation of debt, contributions to an indirect other than interest and dividends, you are not required to sign the certification, but you nater.	sactions, i vidual reti	item 2 reme	does nt arra	not a _l	oply. F ent (IF	or m	nortg and	age int general	erest ly,
Sign Here	Signature of									
1616	U.S. person ► John Stafford	Date ► 1	2/20/2	016						

(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 informatoin.

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

Give Form to the requester. Do not send to the IRS.

€	entity's name on line 2.) Egan Supply Company					,					Ü	
ļ	2 Business name/disregarded entity name, if different from above											
on page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐	ed on line 1		eck	C	ertain	•	s, no	t in	apply odividua	•	
pe	single-member LLC											
or ty ucti	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Par	rtnership)	<u> </u>		E	xemp	t paye	e co	de (i	f any)		_
Print or type Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a sin that is disregarded from the owner should check the appropriate box for the tax classification of its	owner of t	the LI	LC is	(it	f any)				A repoi		
See	✓ Other (see instructions) ► C Corporation				(A	pplies	o accoun	is maii	ntaine	d outside	tne U.S.,	,
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as it and you are providing this form to a partnership, trust, or estate in which you have an ownership interpox if you have any foreign partners, owners, or beneficiaries. See instructions	erest, chec	k this	3								
	5 Address (number, street, and apt. or suite no.) See instructions. 13838 INDUSTRIAL RD	Requeste	er's n	ame	and	addre	ess (op	tiona	al)			
	6 City, state, and ZIP code OMAHA, NE 68137											
-	7 List account number(s) here (optional)											—
Part	Taxpayer Identification Number (TIN) our TIN in the appropriate box. The TIN provided must match the name given on line 1 to ave	oid	60	oiol 4			numk					
	withholding. For individuals, this is generally your social security number (SSN). However, fo		300	Ciais	seci	urity	numb	Jei	_	_		_
	alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other it is your employer identification number (EIN). If you do not have a number, see How to get r.	ta				-						
Note: If	the account is in more than one name, see the instructions for line 1. Also see What Name		or	nla	- I	done	ificati	ion		2625		7
	the account is in more than one name, see the instructions for line 1. Also see What Name To Give the Requester for guidelines on whose number to enter.	anu	EIII	Г	eri	deni	IIICati	1011	ıuıı	iber	_	ļ
			4	7	-	0	4	9	5	3 8	6	
Part l	Certification											
Under p	enalties 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	r to b	e iss	ued	to m	e); an	d				
(IRS	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b)) that I am subject to backup withholding as a result of a failure to report all interest or divide ect 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	ng is corre	ect.									
because paid, ac	ation instructions. You must cross out item 2 above if you have been notified by the IRS is you have failed to report all interest and dividends on your tax return. For real estate transquisition or abandonment of secured property, cancellation of debt, contributions to an individent to some than interest and dividends, you are not required to sign the certification, but you mater.	sactions, i vidual reti	item reme	2 do ent ai	es n ran	iot ap geme	ply. F ent (IR	or m	orto and	gage ir genera	terest ally,	
Sign Here	Signature of U.S. person ► Jim Egan	Date ► 3/	/14/20	018								
	ole, porcon. Vini Egun	Date F 3/	// 2.(

(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 informatoin.

Give Form to the requester. Do not send to the IRS.

	ent	varile of entity/findividual. An entry is required. (For a sole proprietor of disregarded entity, enter the c ity's name on line 2.) linn Scientific Inc	owners i	name	e on iii	ie i, ai	ia en	iter tri	e bus	ness/	iisre	garded
		Business name/disregarded entity name, if different from above										
on page 3	on	a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. ■ Individual/sole proprietor or ■ C Corporation ■ S Corporation ■ Partnership ■ True	on line 1.		eck	4 Exe certain instruc	n ent	ities,	not in	dividu		
ype	si	ingle-member LLC				Exem	nt na	.vee c	ode (if any)		
Print or type		Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partne		_	_	LXCIII	рі ра	iyee c) suo	ii aiiy <i>)</i>		
Print or type See Specific Instructions on	L a ti	lote: Check the appropriate box in the line above for the tax classification of the single-member owner LC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the ownother LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single nat is disregarded from the owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of tax classificat	vner of the e-membe	ne LL	.C is	Exem (if any		from	FATC	A repo	orting	g code
See S	Г	Other (see instructions) ►				(Applies	to acc	ounts m	aintaine	ed outsid	e the I	U.S.)
	an	b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its ta d you are providing this form to a partnership, trust, or estate in which you have an ownership interes x if you have any foreign partners, owners, or beneficiaries. See instructions	st, check	this								
		Address (number, street, and apt. or suite no.) See instructions. O Box 219	Requeste	r's na	ame ai	nd addr	ess ((optio	nal)			
		City, state, and ZIP code atavia, IL 60510										
	7 L	ist account number(s) here (optional)										
Pa	rt I	Taxpayer Identification Number (TIN)										
Enter backu reside	your up wit ent al es, it	TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid thholding. For individuals, this is generally your social security number (SSN). However, for a lien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other is your employer identification number (EIN). If you do not have a number, see How to get a	a [Soc	cial se	ecurity -	/ nu	mbei	- [
		a constitution in many them are a secretarily instructions for line 4. Also accomplished blows	_	or 			4:6: -	-4!				_
		e account is in more than one name, see the instructions for line 1. Also see What Name an o Give the Requester for guidelines on whose number to enter.	10 [Em	pioye	r iden	TITIC	ation	ı nur	nber		=
				3	6	- 2	9	2	6	9	1	4
Par	t II	Certification										
Unde	r pen	alties of perjury, I certify that:										
		mber shown on this form is my correct taxpayer identification number (or I am waiting for a r					,					
(IF	RS) tl	ot subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I I nat I am subject to backup withholding as a result of a failure to report all interest or dividend to backup withholding; and	have no ds, or (c)	t bed) the	en not IRS t	ified b	y the lified	Inte	rnal F hat I	even am n∈	ue S Hon	Service iger
3. I a	m a	U.S. citizen or other U.S. person (defined below); and										
4. Th	e FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	is corre	ct.								
becau paid,	ise y acqu ents	ion instructions. You must cross out item 2 above if you have been notified by the IRS that ou have failed to report all interest and dividends on your tax return. For real estate transact isition or abandonment of secured property, cancellation of debt, contributions to an individuation other than interest and dividends, you are not required to sign the certification, but you muster.	ctions, it lual retir	em 2	2 doe: nt arr	s not a angem	pply ent (. For (IRA)	morte , and	gage i gene	nter ally	est ,
Sigr	, I	Signature of	uto ► 9/2	26/20	17							

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

Request for Taxpayer Identification Number and Certification

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

send to the IRS.

• Go to www.irs.gov/FormW9 for instructions and the latest informatoin.

Give Form to the requester. Do not

	Hauff Mid	America Sports												
		•	tity name, if different f	from above										
	Hauff Spor	ıs												
page 3		opropriate box for fed he following seven bo		n of the entity/individu	ual whose name is ent	tered on lir	ne 1. Ch	neck	certai	emptions n entities ctions or	s, not i	ndividua		
	Individua single-mem	l/sole proprietor or ber LLC	C Corporation	S Corporation	Partnership	☐ Trust/e	state		ilistiu	CHOITS OF	page	<i>5)</i> .		
or ty uction	Limited I	ability company. Ent	ter the tax classificati	on (C=C corporation	, S=S corporation, P=	Partnersh	ip) ►		Exem	pt payee	code	(if any)		
Print or type See Specific Instructions on	LLC if the l another LL	LC is classified as a C that is not disregar	single-member LLC rded from the owner f	that is disregarded fr for U.S. federal tax pเ	n of the single-member om the owner unless urposes. Otherwise, a he tax classification of	the owner single-me	of the L mber Ll	LC is	Exem (if any	ption from	n FAT	CA repo	rting	code
See S	Cother (se	ee instructions) ►							(Applies	to accounts	s maintai	ned outside	the l	J.S.)
	and you are	providing this form to	•	or estate in which yo	LC" and entered "P" a ou have an ownership ons	interest, cl	neck thi	is						
	,	number, street, and a ND STREET	apt. or suite no.) See	instructions.		Reque	ester's r	name a	ind add	ress (opt	ional)			
		and ZIP code												
		E 68007-5050												
	7 List accou	nt number(s) here (op	otional)											
Part	Tay	naver Identifica	tion Number (TI	N)										
			•	•	ne given on line 1 to	avoid	So	cial s	ecurit	y numb	er			
backup	withholding	. For individuals, thi	is is generally your	social security num	ber (SSN). However	r, for a		1 1		, .	=		_	$\overline{}$
					Part I, later. For othe number, see How to				-		-			
TIN, lat		ipioyer identificatio	in number (Env). It	you do not nave a i	idilibel, see How to	gcra					ا ل			
							or							
			ne name, see the in delines on whose n		. Also see What Nai	me and	En	nploy	er ider	ntification	on nu	mber		
rambe	7 70 0170 111	rioquostor for guit	acimico dil Miledo II	ambor to order.			4	6	- 0	2 8	3 4	3	8	2
Part	II Cei	rtification												
Under	penalties of p	perjury, I certify that	t:											
1. The	number sho	wn on this form is r	my correct taxpayer	identification numb	oer (or I am waiting	for a num	ber to b	oe issu	ued to r	ne); and	ı			
(IR	S) that I am s	to backup withhold ubject to backup wi p withholding; and	i ing because: (a) l a ithholding as a resu	am exempt from bac alt of a failure to rep	ekup withholding, or oort all interest or div	(b) I have vidends, o	not bore the r	een no e IRS	tified b has no	y the Int	ernal that	Revent I am no	ie S Ion	ervice iger
3. I an	n a U.S. citize	en or other U.S. per	rson (defined below); and										
4. The	FATCA cod	e(s) entered on this	form (if any) indica	iting that I am exem	npt from FATCA repo	orting is co	orrect.							
becaus paid, a	se you have cquisition or nts other that	failed to report all in abandonment of se	nterest and dividend ecured property, ca	ds on your tax retur ncellation of debt, o	een notified by the IF rn. For real estate transcributions to an ir certification, but you	ansaction ndividual i	s, item etirem	2 doe ent ar	s not a	ipply. Fo	or mor A), an	tgage ii d gener	nter ally,	est ,
Sign	Signature	of									· <u>—</u>			
Here	_	on ► Benny Oliver				Date ►	8/17/2	023						

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the entity's name on line 2.) INNOVATIVE OFFICE SOLUTIONS	ie owner's	name (on line	1, and	l enter th	e busi	ness/di	sregarded
	2 Business name/disregarded entity name, if different from above								
on page 3	·	d on line 1		C	ertain	nptions (c entities, ions on p	not inc	lividual	
type ctions	single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Par	rtnershin) ı		E	xemp	t payee o	ode (i	f any)	
Print or type See Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the 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	wner. Do r owner of t gle-memb	not ched	is E		ion from			ting code
See S	☐ Other (see instructions) ►			(A	pplies to	accounts m	aintaine	d outside	the U.S.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its and you are providing this form to a partnership, trust, or estate in which you have an ownership into box if you have any foreign partners, owners, or beneficiaries. See instructions	erest, chec	k this						
	5 Address (number, street, and apt. or suite no.) See instructions. 151 E CLIFF RD	Requeste			addre	ss (optio	nal)		
	6 City, state, and ZIP code BURNSVILLE, MN 55337								
	7 List account number(s) here (optional)								
Part	Taxpayer Identification Number (TIN)								
Enter y	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo		Socia	al seci	urity	numbei			
esider	withholding. For individuals, this is generally your social security number (SSN). However, for tallien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other, it is your employer identification number (EIN). If you do not have a number, see How to get				- [-		
i iiv, iai	51.		or						
	f the account is in more than one name, see the instructions for line 1. Also see What Name r To Give the Requester for guidelines on whose number to enter.	and	Emp	loyer i	dent	ification	num	ber	
vuilibe	To Give the requester for guidelines of whose number to enter.		3	6 -	4	5 5	0	6 8	8
Part	Certification								
Jnder	penalties of perjury, I certify that:								
I. The	number shown on this form is my correct taxpayer identification number (or I am waiting for	a number	to be	issued	to m	e); and			
(IRS	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) that I am subject to backup withholding as a result of a failure to report all interest or divide ect to backup withholding; and								
3. Iam	a U.S. citizen or other U.S. person (defined below); and								
I. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is corre	ect.						
ecaus paid, a	cation instructions. You must cross out item 2 above if you have been notified by the IRS to be you have failed to report all interest and dividends on your tax return. For real estate trans equisition or abandonment of secured property, cancellation of debt, contributions to an indivite other than interest and dividends, you are not required to sign the certification, but you mater.	sactions, i /idual reti	item 2 remen	does n t arran	ot ap geme	ply. For nt (IRA)	morto , and	jage in genera	terest ally,
Sign Here	Signature of U.S. person ▶ Rick Copeland	Date ► 3/	/23/201	8					

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest informatoin.

е	I Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the ntity's name on line 2.) Lakeshore Parent, LLC	e owner's	name	on line	1, and	d enter th	e busi	ness/dis	regarded
<u> </u>	Business name/disregarded entity name, if different from above								
	Lakeshore Learning Materials, LLC								
page	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes.	d on line 1	. Che	С	ertain	nptions (o entities, tions on p	not in	dividuals	
pe ons on	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ 1 single-member LLC	Trust/estat	te						
or ty ructi	□ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Part □ Limited liability company.	ا (tnership	<u> P</u>	_ [xemp	t payee o	ode (i	f any) _	
Print or type See Specific Instructions on	Note: Check the appropriate box in the line above for the tax classification of the single-member ov LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a sing that is disregarded from the owner should check the appropriate box for the tax classification of its	owner of t gle-membe	he LL	C is	xemp	tion from	FATC	A report	ing code
See S	☐ Other (see instructions) ►			(A	Applies to	o accounts n	naintaine	d outside t	he U.S.)
á	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its ind you are providing this form to a partnership, trust, or estate in which you have an ownership interestory if you have any foreign partners, owners, or beneficiaries. See instructions	rest, chec	k this						
l l	5 Address (number, street, and apt. or suite no.) See instructions.	Requeste			addre	ess (ontio	nal)		
	2695 E. Dominguez St.	rtoquooto)	ino ana	addic	oo (opiio	iiai,		
1	6 City, state, and ZIP code Carson, CA 90895								
	List account number(s) here (optional)								
Part I	1 7								
	ur TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo		Soc	ial sec	urity	numbe	r		
	vithholding. For individuals, this is generally your social security number (SSN). However, fo alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other	ora] [Г		
entities,	it is your employer identification number (EIN). If you do not have a number, see How to get	а			-		-		
TIN, late	6 .					•	_	•	
Note: If	the account is in more than one name, see the instructions for line 1. Also see What Name	1	or Emr	olover	ident	ificatio	n nun	ıber	
	To Give the Requester for guidelines on whose number to enter.	unu	,				1 1		_
			8	7 -	2	8 0	2	6 5	8
Part I	Certification			1					
Jnder p	enalties of perjury, I certify that:								
1. The i	number shown on this form is my correct taxpayer identification number (or I am waiting for a	a number	to be	issued	l to m	e); and			
(IRS)	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) that I am subject to backup withholding as a result of a failure to report all interest or divide et to backup withholding; and								
3. I am	a U.S. citizen or other U.S. person (defined below); and								
4. The I	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is corre	ect.						
because paid, ac	ation instructions. You must cross out item 2 above if you have been notified by the IRS to you have failed to report all interest and dividends on your tax return. For real estate transquisition or abandonment of secured property, cancellation of debt, contributions to an indivisor so ther than interest and dividends, you are not required to sign the certification, but you mater.	actions, i idual retii	tem 2 remer	does r nt arran	not ap igeme	ply. For ent (IRA)	morto , and	gage int genera	erest lly,
Sign	Signature of								
Here	U.S. person ► Eunice Peterson	Date ► 11	1/2/202	22					

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest informatoin.

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

ľ	entity's name on line 2.) MIDWEST SHOP SUPPLIES INC										
ŀ	2 Business name/disregarded entity name, if different from above										—
	MIDWEST TECHNOLOGY PRODUCTS										
n page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes.				certair	mptions n entities ctions or	, not i	indiv			
pe ons or	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Tr single-member LLC	rust/estat	e								
or ty ructi	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partr	nership) •		_	Exem	ot payee	code	(if a	ıny)		_
Print or type See Specific Instructions on	Note: Check the appropriate box in the line above for the tax classification of the single-member own LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the oranother LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single that is disregarded from the owner should check the appropriate box for the tax classification of its or	wner of t e-membe	he LL	.C is	Exemption (if any	otion from	n FAT	CA	reportii	ng co	de
See S					(Applies	to accounts	mainta	ined o	utside th	ie U.S.)	
•	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its and you are providing this form to a partnership, trust, or estate in which you have an ownership interestox if you have any foreign partners, owners, or beneficiaries. See instructions	est, chec	k this								
	5 Address (number, street, and apt. or suite no.) See instructions. 2600 BRIDGEPORT DR	Requeste	er's na	ame an	d addr	ess (opt	onal)				
	6 City, state, and ZIP code										
ŀ	SIOUX CITY, IA 51111 7 List account number(s) here (optional)										
	7 List account number(s) here (optional)										
Part	Taxpayer Identification Number (TIN)										_
	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid		Soc	ial se	curity	numb	er				
esiden	withholding. For individuals, this is generally your social security number (SSN). However, for t alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other it is your employer identification number (EIN). If you do not have a number, see How to get a per.] -] -				
lotor I	Etha account is in more than one name and the instructions for line 1. Also see What Name a		or Em	nlovou	idon	tificatio		ımh			1
	f the account is in more than one name, see the instructions for line 1. Also see What Name a r To Give the Requester for guidelines on whose number to enter.	iiu		pioyei	luen	IIIICalii)II IIU	טוווג	er	_] 1
			4	2 -	0	8 7	7 0	5	5 3	3	
Part	Certification						_	_			
Jnder p	penalties of perjury, I certify that:										
. The	number shown on this form is my correct taxpayer identification number (or I am waiting for a	number	to be	e issue	d to n	ne); and	i				
(IRS	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I i) that I am subject to backup withholding as a result of a failure to report all interest or dividence to backup withholding; and										
. I am	a U.S. citizen or other U.S. person (defined below); and										
. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	g is corre	ect.								
ecaus aid, ad	cation instructions. You must cross out item 2 above if you have been notified by the IRS the you have failed to report all interest and dividends on your tax return. For real estate transa equisition or abandonment of secured property, cancellation of debt, contributions to an individute other than interest and dividends, you are not required to sign the certification, but you muater.	ctions, i dual retii	tem 2 reme	2 does nt arra	not a ngem	pply. Fo	or moi A), an	rtga id ge	ge inte eneral	erest ly,	
Sign	Signature of					·					
lere	•	ate ► 12	2/21/2	016							
	Cat. No. 10231X		_			Fo	rm V	/ -9	(Rev.	3-20	- 24)

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	entity's name on entity/individual. An entity is required. (For a sole proprietor or disregarded entity, enter the entity's name on line 2.) NATIONAL ART & SCHOOL SUPPLIES	ne owner s	name	e on	iine	i, an	a em	er un	e bus	mess/c	isre	garded
	2 Business name/disregarded entity name, if different from above											
on page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐	ed on line 1		eck	С		enti	ties,	not in	apply dividua 3):		
	single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Pa	artnershin) l			E	xemp	ot pay	yee c	ode (if any)		
Print of type See Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the 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. Do nowner of the owner owner owner.	not ch	LC is	₃∣╘	xemp		from	FATO	CA repo	rtinç	g code
See Sp	Ø Other (see instructions) ► C Corporation				(А	pplies t	to acco	unts m	naintain	ed outside	e the	U.S.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as it and you are providing this form to a partnership, trust, or estate in which you have an ownership into box if you have any foreign partners, owners, or beneficiaries. See instructions	terest, chec	k this	3								
	5 Address (number, street, and apt. or suite no.) See instructions. 2195 eliazabeth ave. po box 1134	Requeste	er's na	ame	and	addre	ess (optio	nal)			
	6 City, state, and ZIP code Rahway, NJ 07065											
	7 List account number(s) here (optional)											
Part	Taxpayer Identification Number (TIN)											
	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		Soc	cial	sec	urity	nur	nbei	•			
esiden	withholding. For individuals, this is generally your social security number (SSN). However, fut alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other, it is your employer identification number (EIN). If you do not have a number, see How to ge] - [- [
,		(or									
	f the account is in more than one name, see the instructions for line 1. Also see What Name r To Give the Requester for guidelines on whose number to enter.	e and	Em	plo	yer i	ident	tifica	atior	nuı	nber		
T	The Give the requester for guidelines on whose number to cities.		2	2	-	3	6	2	6	4	3	3
Part	Certification											
Jnder p	penalties of perjury, I certify that:											
. The	number shown on this form is my correct taxpayer identification number (or I am waiting for	a number	to b	e is	sued	to m	ne); a	and				
(IRS	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b 5) that I am subject to backup withholding as a result of a failure to report all interest or dividence to backup withholding; and											
. I am	a U.S. citizen or other U.S. person (defined below); and											
. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporti	ing is corre	ect.									
ecaus aid, a	cation instructions. You must cross out item 2 above if you have been notified by the IRS are you have failed to report all interest and dividends on your tax return. For real estate transcapisation or abandonment of secured property, cancellation of debt, contributions to an indints other than interest and dividends, you are not required to sign the certification, but you relater.	ısactions, i ividual retir	tem: reme	2 do ent a	oes r arran	not ap geme	oply. ent (For IRA)	mort , and	gage i genei	nter ally	est ,
Sign Iere	Signature of U.S. person ► levy friedman	Date ► 12	2/11/2	2017								_

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

Request for Taxpayer Identification Number and Certification

send to the IRS.

• Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not

	entity's	s name on I		try is required. (For	a sole proprietor or d	lisregarded entity, ente	er the owner's	s nam	ne on lin	e 1, an	d enter ti	ne bus	iness/dis	regarded
	2 Busi			ity name, if different	from above									
page 3			oriate box for fed ollowing seven bo		n of the entity/individ	ual whose name is ent	tered on line	1. Ch	ieck	certain	nptions (entities,	not in	dividuals	
00		dividual/sole e-member l	e proprietor or LLC	C Corporation	S Corporation	☐ Partnership	Trust/esta	ite		IIISII UC	aions on	page	5).	
or tyl uctic	□ Lir	mited liabili	ty company. Ente	er the tax classificat	tion (C=C corporation	n, S=S corporation, P=	Partnership)	<u> </u>		Exemp	ot payee	code (if any)	
Print or type See Specific Instructions	LLC anot	if the LLC i her LLC tha	s classified as a at it is not disregare	single-member LLC ded from the owner	that is disregarded f for U.S. federal tax p	on of the single-member from the owner unless surposes. Otherwise, a the tax classification of	the owner of single-memb	the L	LC is	Exemp		FAT(CA report	ing code
See S	™ Ot	ther (see in	structions) ► S	Corporation						(Applies	to accounts	maintain	ed outside t	he U.S.)
	and yo	ou are provi	ding this form to	a partnership, trust	, or estate in which ye	LC" and entered "P" a ou have an ownership ions	interest, ched	ck thi	s					
		ress (numb	er, street, and a	pt. or suite no.) See	instructions.		Request	er's r	name an	ıd addr	ess (option	onal)		
	1	, state, and ENY, IA 500												
	7 List	account nu	mber(s) here (op	tional)										
Part	1	Taxpay	er Identificat	tion Number (T	IN)									
						ne given on line 1 to nber (SSN). Howeve		So	cial se	curity	numbe	r		
reside	nt alien s, it is y	ı, sole prop	orietor, or disreg	garded entity, see	the instructions for	Part I, later. For other number, see How to	er			[] - [
								or						
				e name, see the il lelines on whose i		1. Also see What Nai	me and	En	npioye	riaen	tificatio	n nui	nber	_
								4	2	- 0	9 4	2	3 9	3
Part	П	Certific	cation											
Under	penalti	ies of perju	ıry, I certify that	:										
1. The	e numb	er shown o	on this form is n	ny correct taxpaye	r identification num	ber (or I am waiting	for a numbe	r to b	oe issue	ed to m	ne); and			
(IR	S) that	I am subje				ekup withholding, or port all interest or div								
3. Ian	n a U.S	6. citizen o	other U.S. pers	son (defined below	v); and									
4. The	FATC	A code(s)	entered on this	form (if any) indic	ating that I am exer	npt from FATCA repo	orting is corr	ect.						
becaus paid, a	se you acquisiti ents oth	have failed ion or aba	d to report all in ndonment of se	terest and divider cured property, ca	nds on your tax retu ancellation of debt,	een notified by the IF rn. For real estate tr contributions to an ir e certification, but you	ansactions, ndividual ret	item irem	2 does ent arra	not ap angem	oply. For ent (IRA	r mort .), and	gage int genera	erest lly,
Sign Here	Sig	nature of S. person ►	RICHARD JOHNS	SON			Date ► 1	2/5/2	019					

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

entity's name on line 2.)

Request for Taxpayer Identification Number and Certification

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

send to the IRS.

• Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS

			/ I''																									
	2 Bus	siness name	e/disregarded e	ntity na	ame, if	different	t fro	om	above	е																		
on page 3	only c	one of the fo	priate box for fe ollowing seven I e proprietor or	boxes.	i.	assificatio			he ent	•				name i		red on I			eck	С	ertain	n ent	ons (c ities, i s on p	not in	divid	,	,	
pe ons	sing	le-member	TC																									
or ty ruction	□ Li	imited liabil	ity company. Er	nter th	ne tax c	classifica	ation	n (C	C=C c	corpo	ration,	, S=S	S corp	oration	n, P=P	artners	hip) ı	_		E	xemp	ot pa	yee c	ode ((if an	y)		_
Print or type See Specific Instructions on	LLC ano	if the LLC the	e appropriate b is classified as at is not disrega ded from the ow	a singl arded	le-men from th	nber LLC ne owner	C tha	nat i r U.	is disr .S. fed	regar deral	ded fro	om thurpos	he ow ses. O	ner un	less th se, a si	e owne	er of t	he Ll	LC i	s E	xemp f any)		from	FATO	CA re	portii	ng co	ode
See S	™ O	other (see in	structions) ► (C Corp	poratio	on														(A	pplies t	to acc	ounts m	aintain	ed out	tside th	e U.S.)
	and y	ou are prov	ou checked "Piding this form the name of the community of	to a pa	artnersl	hip, trust	t, or	r es	state i	in wh	ich you	u hav	ive an	owner	ship in		chec	k this	S									
		dress (numb	per, street, and	apt. o	r suite	no.) See	e ins	stru	uction	ns.						Req	ueste	er's n	ame	e and	addre	ess	(optio	nal)				
		, state, and																										
	WES	STLAND, M	I 48185																									
	7 List	account nu	ımber(s) here (d	optiona	al)																							
Part	1	Taxpa	ver Identific	atior	1 Nun	nber (T	IN)	1)																				
Enter y	our TI		opropriate box															So	cial	sec	urity	nu	mber					
resider	nt alier s, it is y	n, sole pro _l	r individuals, tl prietor, or disre yer identificati	egard	ded ent	tity, see	the	e ir	nstruc	ction	s for F	Part `	Ì, late	r. For	other] - [- [
Noto:	If the	account is	in more than c	ne n	ame c	oo the ii	inetr	tru	ctions	e for	lina 1	Λle	0 00	λ/hat	t Nam	e and		or Em	nlo	wor	dont	tific	atior		mho	r		7
			equester for gu									. Als	30 300	VVIIA	LINAIII	e and			I	уеі П		I	T	l	I		1	_
																		3	4	-	1	1	0	5	4	8	7	
Part	П	Certifi	cation																	-								
Under	penalt	ies of perju	ury, I certify that	at:																								
1. The	numb	er shown	on this form is	my c	orrect	taxpaye	er id	der	ntifica	ation	numb	oer (d	or I a	m wait	ing fo	r a nur	mber	to b	e is	sued	to m	ne);	and					
(IR	S) that	I am subje	eckup withholect to backup vithholding; and	withho																								
3. I an	n a U.S	S. citizen o	r other U.S. pe	erson	(define	ed belov	w); a	an	nd																			
4. The	FATO	CA code(s)	entered on the	is forn	m (if ar	ny) indic	catin	ing	that I	l am	exem	npt fro	rom F	ATCA	repor	ting is	corre	ect.										
becaus paid, a	se you cquisi ents oth	have faile tion or aba	ions. You must d to report all ndonment of s terest and divi	intere secure	est and ed pro	d divider perty, ca	nds anc	s or cell	n you llation	ır tax ı of d	returi debt, c	rn. Fo	or rea	al esta ons to	te trar an ind	nsactio lividual	ns, i I reti	tem reme	2 de ent a	oes r arran	ot ap geme	pply ent	. For (IRA)	mort , and	gag I ger	e inte nerall	erest ly,	
Sign	1 510	gnature of																										
Here		S. person ▶	Isaac Yeung													Date	▶ 2/	19/20	020									
											_												_	14.	^	_		

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest informatoin.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter th	ne owner's na	ame on lin	e 1, and	enter the	busii	ness/dis	regarded				
e	ntity's name on line 2.) PASCO scientific A CA Corporation											
-	2 Business name/disregarded entity name, if different from above											
-	PASCO sceintific											
page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entereonly one of the following seven boxes.	4 Exemptions (codes apply of certain entities, not individual instructions on page 3):										
0.0	$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$	Trust/estate		ii isti uct	ions on p	age o	<i>j</i> .					
or typ	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Par	rtnership) ▶ _		Exempt	payee co	ode (i	any) _					
Print or type See Specific Instructions	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.						Levemption from EΔI('Δ reporting cod					
See S	☐ Other (see instructions) ►			(Applies to	accounts ma	aintaine	d outside t	he U.S.)				
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as it and you are providing this form to a partnership, trust, or estate in which you have an ownership into you fix you have any foreign partners, owners, or beneficiaries. See instructions	erest, check t	his									
-	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's		d addre	ss (option	nal)						
-	10101 Foothills Blvd 6 City, state, and ZIP code											
	Roseville, CA 95747											
	7 List account number(s) here (optional)											
Part	Taxpayer Identification Number (TIN)											
	ur TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo	oid S	Social se	curity	number							
	withholding. For individuals, this is generally your social security number (SSN). However, for alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other			7 7		Г						
entities,	it is your employer identification number (EIN). If you do not have a number, see How to get	t a		-		-						
ΓIN, late	r.	or	•									
	the account is in more than one name, see the instructions for line 1. Also see What Name		mploye	r identi	fication	num	ber					
Number	To Give the Requester for guidelines on whose number to enter.	9	4	_ 2	2 6	6	8 1	7				
Dout I	Contification						<u> </u>					
Part	Certification enalties of perjury, I certify that:											
	enames of perjury, i certify that. number shown on this form is my correct taxpayer identification number (or I am waiting for	a number to	he issue	ad to me	a). and							
	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b)				,	nal R	evenue	Service				
(IRS	that I am subject to backup withholding as a result of a failure to report all interest or divide ect to backup withholding; and											
3. Iam	a U.S. citizen or other U.S. person (defined below); and											
I. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is correct	t.									
ecause paid, ac	ation instructions. You must cross out item 2 above if you have been notified by the IRS is you have failed to report all interest and dividends on your tax return. For real estate transquisition or abandonment of secured property, cancellation of debt, contributions to an individend to some interest and dividends, you are not required to sign the certification, but you mater.	sactions, iter vidual retirer	m 2 does ment arra	not ap angeme	ply. For i nt (IRA),	mortg and	age int genera	terest Ily,				
Sign	Signature of						-					
Here		Date ▶ 10/1	2/2017									

(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 informatoin.

Give Form to the requester. Do not send to the IRS.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter tentity's name on line 2.)	the owner's nam	ne on line	1, and enter th	ie busin	ess/dis	sregarded			
Print or type See Specific Instructions on page 3	PYRAMID PAPER COMPANY 2 Business name/disregarded entity name, if different from above PYRAMID SCHOOL PRODUCTS									
	3a Check appropriate box for federal tax classification of the entity/individual whose name is enter only one of the following seven boxes.	red on line 1. Ch	(4 Exemptions (certain entities, instructions on	not indi	viduals				
	single-member LLC	Trustrestate				,	_			
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Pa	• • • • • • • • • • • • • • • • • • • •		Exempt payee	code (if	any) _				
	Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a sit that is disregarded from the owner should check the appropriate box for the tax classification of its	e owner of the L ngle-member LL	LC is	Exemption from (if any)	FATCA	report	ting code			
See S	☐ Other (see instructions) ►		(Applies to accounts r	maintained	outside t	the U.S.)			
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as and you are providing this form to a partnership, trust, or estate in which you have an ownership int box if you have any foreign partners, owners, or beneficiaries. See instructions	terest, check this	is							
	5 Address (number, street, and apt. or suite no.) See instructions. 6510 N. 54TH ST.	Requester's n	name and	d address (option	nal)					
	6 City, state, and ZIP code TAMPA, FL 33610-1908									
	7 List account number(s) here (optional)									
Par	Taxpayer Identification Number (TIN)									
	rour TIN in the appropriate box. The TIN provided must match the name given on line 1 to av o withholding. For individuals, this is generally your social security number (SSN). However, t		cial sec	curity numbe	r					
reside	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 How to ge			-	-					
		or - and		i da máidi a aái a		.				
	lf the account is in more than one name, see the instructions for line 1. Also see What Name or To Give the Requester for guidelines on whose number to enter.	e and En	ipioyer	identificatio	T	Der	\blacksquare			
		5	9 -	0 9 3	2	6 6	0			
Par	Certification									
	penalties of perjury, I certify that:									
	number shown on this form is my correct taxpayer identification number (or I am waiting for			, .						
(IR	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b 5) that I am subject to backup withholding as a result of a failure to report all interest or divid ject to backup withholding; and	o) I have not be lends, or (c) the	een notif e IRS ha	ied by the Inte as notified me	rnal Re that I a	evenue m no	e Service Ionger			
3. I aı	n 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 report	ting is correct.								
becau paid, a	cation instructions. You must cross out item 2 above if you have been notified by the IRS se you have failed to report all interest and dividends on your tax return. For real estate tran equisition or abandonment of secured property, cancellation of debt, contributions to an ind nts other than interest and dividends, you are not required to sign the certification, but you later.	nsactions, item ividual retireme	i 2 does ent arrai	not apply. For ngement (IRA	mortga), and g	age in genera	terest Illy,			
Sign Here	Signature of U.S. person ► LARRY MILLER, PRESIDENT	Date ► 9/8/20)23							

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the entity's name on line 2.)	ne owner's	name	e on line	1, an	d enter th	e bus	sines	ss/dis	regarde	эd		
	Rapids Wholesale Business name/disregarded entity name, if different from above										_		
on page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐	С	k 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):										
type tions	single-member LLC							Exempt payee code (if any)					
Print or type See Specific Instructions	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.						Everytion from EATCA reporting code						
See Sp	☐ Other (see instructions) ►			(A	pplies t	o accounts r	naintair	ied ou	utside t	he U.S.)			
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as it and you are providing this form to a partnership, trust, or estate in which you have an ownership into box if you have any foreign partners, owners, or beneficiaries. See instructions	erest, ched	ck this										
	5 Address (number, street, and apt. or suite no.) See instructions. 6201 South Gateway Drive				ne and address (optional)								
	6 City, state, and ZIP code Marion, IA 52302												
	7 List account number(s) here (optional)												
Part	Taxpayer Identification Number (TIN)										_		
	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		Soc	ial sec	urity	numbe	r						
esiden	o withholding. For individuals, this is generally your social security number (SSN). However, for 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 How to get] _ [_ [
ΓIN, late		ı a	or		JL								
	If the account is in more than one name, see the instructions for line 1. Also see What Name	and	Em	ployer	yer identification number								
Numbe	er To Give the Requester for guidelines on whose number to enter.		4	2 -	1	3 7	8	3	T ₀	9			
Part	Certification							Щ			_		
	penalties of perjury, I certify that:										_		
	e number shown on this form is my correct taxpayer identification number (or I am waiting for	a numbe	r to be	e issued	to m	e); and							
2. I am (IRS	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) S) that I am subject to backup withholding as a result of a failure to report all interest or divide ject to backup withholding; and	I have n	ot be	en notifi	ed by	the Inte					се		
3. Iam	n a U.S. citizen or other U.S. person (defined below); and												
I. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is corr	ect.										
ecaus paid, a	cation instructions. You must cross out item 2 above if you have been notified by the IRS see you have failed to report all interest and dividends on your tax return. For real estate transcrousition or abandonment of secured property, cancellation of debt, contributions to an indivints other than interest and dividends, you are not required to sign the certification, but you maker.	sactions, ⁄idual reti	item 2 ireme	2 does r nt arran	not ap geme	oply. For ent (IRA)	mor), and	tgag d gei	je int nera	erest lly,			
Sign Here	Signature of	Date ► 3	/22/20	17							_		

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter th ntity's name on line 2.)	ne owner's	name	on line	1, and	d enter th	ne bus	iness/dis	regarded	
	S&S Worldwide									
	2 Business name/disregarded entity name, if different from above									
ă	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐	С	4 Exemptions (codes apply only certain entities, not individuals; instructions on page 3):							
e ns on	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC									
or typ uctio	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►						code (if any) _		
Print or type See Specific Instructions	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.						FATC	A report	ing code	
See S	☐ Other (see instructions) ►			(A	Applies to	accounts i	maintain	ed outside t	he U.S.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its and you are providing this form to a partnership, trust, or estate in which you have an ownership inte you have any foreign partners, owners, or beneficiaries. See instructions	erest, chec	k this							
	5 Address (number, street, and apt. or suite no.) See instructions. 75 Mill Street	Requeste	er's na	me and	addre	ess (optio	onal)			
-	6 City, state, and ZIP code									
-	Colchester, CT 06415									
	7 List account number(s) here (optional)									
Part I	Taxpayer Identification Number (TIN)								-	
	ur TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo		Soc	ial sec	urity	numbe	r			
	withholding. For individuals, this is generally your social security number (SSN). However, for alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other	or a] _ [1 _ [
entities, ΓΙΝ, late	it is your employer identification number (EIN). If you do not have a number, see How to get r	ta								
ini, iato			or							
	the account is in more than one name, see the instructions for line 1. Also see What Name To Give the Requester for guidelines on whose number to enter.	and	Em	ployer	ident	ificatio	n nur	nber		
			0	6 -	0	5 2	0	0 2	0	
Part I	Certification									
Jnder p	enalties of perjury, I certify that:									
I. The i	number shown on this form is my correct taxpayer identification number (or I am waiting for	a number	r to be	e issued	l to m	e); and				
(IRS)	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) that I am subject to backup withholding as a result of a failure to report all interest or divide ect to backup withholding; and									
3. Iam	a U.S. citizen or other U.S. person (defined below); and									
I. The I	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is corre	ect.							
ecause paid, ac	ation instructions. You must cross out item 2 above if you have been notified by the IRS to you have failed to report all interest and dividends on your tax return. For real estate transquisition or abandonment of secured property, cancellation of debt, contributions to an indivite other than interest and dividends, you are not required to sign the certification, but you mater.	sactions, i ⁄idual reti	item 2 ireme	2 does r nt arran	not ap igeme	ply. For ent (IRA	mort), and	gage int genera	erest lly,	
Sign Here	Signature of U.S. person ► Jenna Schall	Date ► 3/	/1/202	3						
	o.o. person / certain	Date ► 3/	,202	•						

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest informatoin.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the entity's name on line 2.)	he owner's	name on lir	ne 1, an	d enter th	e busi	ness/dis	regarded			
	School Health Corporation										
	2 Business name/disregarded entity name, if different from above										
page 3	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes.	4 Exemptions (codes apply only certain entities, not individuals; instructions on page 3):									
00	$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$	Trust/estat	е	11131140		age o)-				
Print or type c Instructions	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Pa	artnership) ▶	· <u> </u>	Exemp	ot payee o	ode (i	f any) _				
Print or type See Specific Instructions	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.						A report	ing code			
See S				(Applies t	o accounts m	aintaine	d outside t	he U.S.)			
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as it and you are providing this form to a partnership, trust, or estate in which you have an ownership into box if you have any foreign partners, owners, or beneficiaries. See instructions	erest, checl	k this								
,	5 Address (number, street, and apt. or suite no.) See instructions. 865 Muirfield Dr		r's name ar	nd addre	ess (optio	nal)					
	6 City, state, and ZIP code	=									
	Hanover Park, IL 60133										
	7 List account number(s) here (optional)										
Part	Taxpayer Identification Number (TIN)										
	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to av		Social se	curity	numbei	•					
esiden	withholding. For individuals, this is generally your social security number (SSN). However, for a tilen, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other it is your employer identification number (EIN). If you do not have a number, see How to ge			- [-					
ΓIN, late	er.		or								
	the account is in more than one name, see the instructions for line 1. Also see What Name	and [Employe	r ident	tification	nun	ber				
vumbe	To Give the Requester for guidelines on whose number to enter.		3 6	- 2	4 2	5	3 8	5			
Part	Certification	·									
Jnder p	enalties of perjury, I certify that:										
I. The	number shown on this form is my correct taxpayer identification number (or I am waiting for	a number	to be issue	ed to m	ie); and						
(IRS	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b)) that I am subject to backup withholding as a result of a failure to report all interest or divide ect to backup withholding; and										
3. Iam	a U.S. citizen or other U.S. person (defined below); and										
I. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporti	ing is corre	ect.								
ecaus paid, ad	tation instructions. You must cross out item 2 above if you have been notified by the IRS by you have failed to report all interest and dividends on your tax return. For real estate transquisition or abandonment of secured property, cancellation of debt, contributions to an individent of their than interest and dividends, you are not required to sign the certification, but you mater.	sactions, it vidual retir	tem 2 does ement arra	s not ap angeme	oply. For ent (IRA)	morto , and	age int genera	erest lly,			
Sign Here	Signature of U.S. person ▶ Anna Eberhardt	Date ► 12	2/21/2016								
	•										

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

Request for Taxpayer Identification Number and Certification

requester. Do not send to the IRS.

Give Form to the

	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owntity's name on line 2.)	ner's name on li	ne 1, and enter the business/disregarded										
	School Specialty, LLC												
	Business name/disregarded entity name, if different from above		_										
•	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered on I nly one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see											
0	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/single-member LLC	instructions on page 3):											
Print or type c Instructions		Exempt payee code (if any)											
Print or type See Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member 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)											
See S	☐ Other (see instructions) ►		(Applies to accounts maintained outside the U.S.)										
a	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax on dyou are providing this form to a partnership, trust, or estate in which you have an ownership interest, ox if you have any foreign partners, owners, or beneficiaries. See instructions	check this_											
•	5 Address (number, street, and apt. or suite no.) See instructions. Requ W6316 Design Drive	uester's name a	nd address (optional)										
(City, state, and ZIP code												
	Greenville, WI 54942												
Ţ.	List account number(s) here (optional)												
D41	Towns and a defined on Name to a (TIN)												
Part I	Taxpayer Identification Number (TIN) ur TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid	Coolel o	acurity number										
	vithholding. For individuals, this is generally your social security number (SSN). However, for a	Social S	ecurity number										
	alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other it is your employer identification number (EIN). If you do not have a number, see How to get a		- -										
TIN, late													
N - 4 IE	the constant is in more than an arrangement of the instantal for the A. Alexandra Miller Manner	or											
	the account is in more than one name, see the instructions for line 1. Also see What Name and To Give the Requester for guidelines on whose number to enter.	Employe	er identification number										
		8 5	- 2 1 6 2 6 8 4										
Part II	Certification												
Under p	enalties of perjury, I certify that:												
1. The r	number shown on this form is my correct taxpayer identification number (or I am waiting for a nur	nber to be issu	ed to me); and										
(IRS)	not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have that I am subject to backup withholding as a result of a failure to report all interest or dividends, et to backup withholding; and												
3. Iam	a U.S. citizen or other U.S. person (defined below); and												
4. The F	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is	correct.											
because paid, acc	ation instructions. You must cross out item 2 above if you have been notified by the IRS that y you have failed to report all interest and dividends on your tax return. For real estate transactio quisition or abandonment of secured property, cancellation of debt, contributions to an individual s other than interest and dividends, you are not required to sign the certification, but you must p ter.	ns, item 2 doe I retirement arr	s not apply. For mortgage interest angement (IRA), and generally,										
Sign	Signature of												
Here		1/23/2023											

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

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest informatoin.

	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's entity's name on line 2.)	name	on line	1, and	d enter t	he bu	sine	ss/disi	egarded			
Print or type See Specific Instructions on page 3	Staples Advantage											
	2 Business name/disregarded entity name, if different from above											
	3a Check appropriate box for federal tax classification of the entity/individual whose name is entered on line 1 only one of the following seven boxes. ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estat		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):									
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership)	_	Exemp	t payee	code	(if a	ny)					
	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do r LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of t another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	C is	Exemp (if any)		n FAT	CA r	eportii	ng code				
See Sp	Ø Other (see instructions) ► C Corporation		(Applies t	o accounts	mainta	ined o	utside th	e U.S.)			
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax class and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, chec box if you have any foreign partners, owners, or beneficiaries. See instructions											
	5 Address (number, street, and apt. or suite no.) See instructions. Requester's name and				ess (opti	ional)						
	11602 W.Center RD											
	6 City, state, and ZIP code											
	Omaha, NE 68144 7 List account number(s) here (optional)											
	T Est decount number(s) here (optional)											
Part	Taxpayer Identification Number (TIN)											
	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	Soci	ial se	curity	numb	er						
	nt alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other			$ \rceil $ $ [$		7_						
entities ΓΙΝ, la	s, it is your employer identification number (EIN). If you do not have a number, see How to get a											
iliv, ia		or										
	If the account is in more than one name, see the instructions for line 1. Also see What Name and	Emp	loyer	ident	ificatio	on nu	ımb	er				
Numbe	er To Give the Requester for guidelines on whose number to enter.	0	4 -	3	3 9	0	8	1	6			
		ľ	٠	Ů			Ľ	<u> </u>				
Part	Certification											
	penalties of perjury, I certify that:											
	e number shown on this form is my correct taxpayer identification number (or I am waiting for a number				,.							
(IR	m not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have no S) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (o pject to backup withholding; and	ot bee c) the	n notif IRS ha	ied by as noti	the Int fied me	ernal that	Rev I am	enue n no lo	Service onger			
3. Ian	m a U.S. citizen or other U.S. person (defined below); and											
I. The	e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is corre	ect.										
ecaus paid, a payme	ication instructions. You must cross out item 2 above if you have been notified by the IRS that you a se you have failed to report all interest and dividends on your tax return. For real estate transactions, i acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retients other than interest and dividends, you are not required to sign the certification, but you must proving later.	item 2 remer	does nt arra	not ap ngeme	ply. Fo	or moi A), an	rtgaç ıd ge	ge inte neral	erest ly,			
Sign Here	I Signature of	2/8/201										
	Date !											

(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 informatoin.

Give Form to the requester. Do not send to the IRS

	ent	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the ity's name on line 2.)	e owner's	name on	i line 1, a	and enter th	ne busir	ness/dis	sregarded					
Print or type See Specific Instructions on page 3		irco Inc Business name/disregarded entity name, if different from above												
	on	a Check appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check ly one of the following seven boxes. ■ Individual/sole proprietor or □ C Corporation □ S Corporation □ Partnership □ Trust/estate					k 4 Exemptions (codes apply or certain entities, not individuals instructions on page 3):							
	s	ingle-member LLC					! /:£							
	Г	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Part	tnership)		Exer	npt payee	code (II	any) _						
	L a t	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.						A report	ing code					
See S		Other (see instructions) ► C Corporation			(Applie	es to accounts	maintained	d outside t	he U.S.)					
	an	b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its d you are providing this form to a partnership, trust, or estate in which you have an ownership inter x if you have any foreign partners, owners, or beneficiaries. See instructions	rest, ched	ck this_										
		Address (number, street, and apt. or suite no.) See instructions.	Request	er's name	and add	dress (optio	nal)							
	6	City, state, and ZIP code CORRANCE, CA 90501												
	_	List account number(s) here (optional)												
Pai	a4 I	Taxpayer Identification Number (TIN)												
Enter backu reside	youi ip wi ent a es, it	r TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo thholding. For individuals, this is generally your social security number (SSN). However, fol lien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other is your employer identification number (EIN). If you do not have a number, see How to get	or a	Social	securi	ty numbe	r] - [
Note:	If th	ne account is in more than one name, see the instructions for line 1. Also see What Name a	and	or Emplo	yer ide	ntificatio	n num	ber						
Numb	er T	o Give the Requester for guidelines on whose number to enter.		3 3	- [8 1	5	7 1	9					
Par	t II	Certification												
Jnde	r per	nalties of perjury, I certify that:												
1. Th	e nu	mber shown on this form is my correct taxpayer identification number (or I am waiting for a	a numbe	r to be is	sued to	me); and								
(IF	RS) tl	ot subject to backup withholding because: (a) I am exempt from backup withholding, or (b) hat I am subject to backup withholding as a result of a failure to report all interest or divider I to backup withholding; and												
3. I a	m a	U.S. citizen or other U.S. person (defined below); and												
4. Th	e FA	ATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportin	ng is corr	ect.										
becau paid,	ıse y acqı ents	tion instructions. You must cross out item 2 above if you have been notified by the IRS to have failed to report all interest and dividends on your tax return. For real estate transmisition or abandonment of secured property, cancellation of debt, contributions to an indiviorate than interest and dividends, you are not required to sign the certification, but you miser.	actions, idual reti	item 2 do irement a	oes not arrangei	apply. For ment (IRA	mortg), and (age in genera	terest Ily,					
Sigr Her		Signature of U.S. person ► ANDREA SIMMS	Date ► 1	2/20/2016	- 									