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.

Befo	re you b	begin. For gui	dance relate	d to the	purpose	of Fo	orm W-	-9, see	e Purp	ose of	Form, l	oelow.											
	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.)																						
Print or type. See Specific Instructions on page 3.	The A	The Almanor Foundation																					
	2 Bu	siness name/dis	regarded ent	ity name, if	f different	t from a	above.																
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. □ Individual/sole proprietor □ C corporation □ S corporation □ Partnership □ Trust/estate □ 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)											ate	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): 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											(Applies to accounts maintained outside the United States.)											
	278 N	278 Main Street, Ste C / P.O. Box 949									Reques	ester's name and address (optional)											
	6 City, state, and ZIP code																						
	Chester, CA 96020																						
	7 Lis	account numb	er(s) here (op	tional)																			
Pa	t I	Taxpayer	Identific	ation N	lumbei	r (TII	N)							6-	aial aa	it-							
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other									Social security number								1						
								or a			-			-									
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.							et a	or			Ш]										
								Employer identification number															
Note: If the account is in more than one name, see the instructions for line 1. See also <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.									and	8	6	- 2	4	6	2	0	9	9					
Par	† II	Certificat	on																				
		ties of perjury,		+-																			
1. The 2. I ar Se	e numbe m not su rvice (IR	er shown on the shown on the shown on the shown on the shown of the sh	nis form is r up withholo ubject to ba	ny correct ling becau ckup with	use (a) l hholding	am ex	xempt	from I	backu	ıp withh	nolding,	, or (b)	I have r	not b	een r	otifie	d by	the I	nteri				am
3. I ar	n a U.S	3. citizen or oth	er U.S. per	son (defin	ned belo	w); an	nd																
4. The	e FATC	A code(s) ente	red on this	form (if ar	ny) indic	ating	that I a	am ex	empt 1	from F	ATCA re	eportin	ng is cor	rect.									
becaı acqui	ise you sition or	instructions. have failed to a pandonment derest and divide	eport all into	erest and operty,	dividend cancella	ds on y ation o	your ta of debt,	ax retur , contr	rn. For	r real es	state tra n individ	nsactio	ons, iten irement	n 2 d arrar	oes n ngeme	ot app ent (IF	oly. F A), a	or mand, g	ortga jener	age ir ally,	itere payı	est p	S
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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