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U.S. DEPARTMENT OF ENERGY -BONNEVILLE POWER ADMINISTRATION (BPA) REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATE

CUI

<u>INSTRUCTIONS</u>: Request for Taxpayer Identification Number and Certificate, and the New Profile Request must be completed to create a profile to allow for contract and/or payment. **See page 3 for Privacy Act Statement**. Due to the sensitive nature of information contained in this form please encrypt (*see the end of the form for options*) the form for submittal. Route the encrypted form via email to <u>vendormaintenance@bpa.gov</u>. **Please send password in a separate email to the same address**. Contact Phone Number: (360) 418-2800

1. Name (Required, as shown on your income tax return)						
2. Business Name/disregarded entity name (If different from above)						
3a. Federal Tax Classification (Check the appropriate box for federal)	eral tax classification of the person whose name is mentioned above in Section 1) Other (Specify)					
and you are providin box if you have any f March 2024 <u>Form W</u>	ed "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, this form to a partnership, trust, or estate in which you have an ownership interest, check this reign partners, owners, or beneficiaries. See 3b instructions on page 3 of IRS form W-9 Rev. . certain entities, not individuals). See instructions on page 4 of Form W-9 (Rev. March 2024)					
Exempt Payee Code (If any)	Exemption from FATCA reporting code (Applies to accounts maintained outside the U.S.)					
5. Address: Street	City					
State	ZIP Code					
6. Social Security Number	or 7. Employer Identification Number					
 Certification: Under 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 issued to me); and I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and 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 is correct. Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. 						
Signature of U.S. Person	Date					
Access is restricted to those with Controlled by: Name/Agency/Org/Contact Info: CUI Category: PRVCY Date:	FILLED IN BY BPA CONTROLLED DISTRIBUTION Lawful Government Purpose and must be protected and marked when printed or distributed.					

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CUI NEW VENDOR PROFILE REQUEST

1. Vendor Name (Required, as on IRS	S tax return or of parent compar	ny)				
2. Vendor Branch/Division Name (If	applicable)					
3. DBA Vendor Name (Name busines also known as, DBA name, etc.)	ss is done as, or commonly as,					
4. Phone Number (Required)	5. Email address					
6. Vendor Contact Person Name (Required)		7. Today's Date (Required)				
8. Business Address: Addr	ess is the same as on W9 form					
If address is different from the address on the W9 form, provide below.						
Street		City				
State	ZIP Code	Country				
9. Customer Account Number for BPA (Account number vendor has assigned to BPA)						
10. BPA Contact Name (Required) 11. Unique Entity ID (UEI) (Issued by www.SAM.gov) 12. DUNS Number (9-digits)						
13. Remit Address: Addr	ess is the same as on W9 form					
If address is different from the address on the W9 form, provide below.						
Street	City					
State	ZIP Code	Country	,			
14. Financial Institution Information	(All fields required for ACH/EFT	payment)				
Bank Name			Bank Pho	ne Number		
Payee Contact Person Name		Pay	yee Contact Pho	ne Number		
Nine Digit Transit Number	Depositor Account Number					
15. Business Classification (Required Federal, Utilities, Land, Attorney,		plier-Regular, C	ustomer, Other C	Government (Non-Federal),		
16. WMBE Award Category (Required, select only one: Disadvantaged (minority), Native American, Woman, Veteran, OR: Large Business, Small Business, Foreign, Non-Profit, Federal, Other Government, Section 8a, HUB Zone, Private Individual)						

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CUI NEW VENDOR PROFILE REQUEST

PRIVACY ACT STATEMENT:

Authority: BPA must file information returns with the IRS, reporting interest, dividends and other income paid to individuals. Under 26 U.S.C. § 6109 and 16 U.S.C. § 832a(f), 839f(a), individuals who receive such payments from BPA are required to provide BPA with a Social Security number or Employer Identification Number.

Purpose: BPA will use this information to report and process payments (or debits) to the IRS, as required by law.

Routine Uses: A record from this system may be disclosed to the Internal Revenue Service to comply with applicable tax laws. A record in this system may be disclosed to BPA/DOE employees and contractors who need the information to complete job functions. A record in this system may be disclosed to the appropriate local, state, or federal agency when the records alone, or in conjunction with other information, indicate a violation or potential violation of law, whether civil, criminal, or regulatory in nature. Other routine uses of this information may be found in the Privacy Act System of Records DOE-18, Financial Accounting System

Disclosure: Individuals who refuse to provide this information may be denied the ability to contract with BPA.

Definition of a U.S. person for federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Options for Encryption:

- www.7-zip.org free product that can be downloaded to encrypt and compress files, files stay on your device.
- Password protect a PDF online for free | Adobe Acrobat free product, requires files to be uploaded to encrypt.