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.

Before you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.

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

	Name of entity/individual, An entry is required, (For a sole proprietor or dentity's name on line 2.)	Isregarded entity, enter the ow	vner's nam	e on	line 1,	and	enter the	busi	ness/dis	regard	ded		
	EAGLE MOUNTAIN SAGINAW ISD												
Print or type. See Specific Instructions on page 3.	2 Business name/disregarded entity name, if different from 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					Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):							
	LLC, Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)						Exempt payee code (if any)						
	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					Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)							
	box for the tax classification of its owner. Other (see instructions) GOV'T PUBLIC SCHOOLS												
	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.)						
See	5 Adr' ess (number, street, and apt. or suite no.). See instructions. Requester's name						dress (or	tiona	D)				
	1600 MUSTANG ROCK RD												
	6 City, state, and ZIP code FT WORTH, TX 76179												
	7 List account number(s) here (optional)												
Day	Town over Islandician town blanch and TIBN												
Part I Taxpayer Identification Number (TIN) Social se						irity z	number						
Enter your TIN in the appropriate box. The TIN provided must match the name given backup withholding. For individuals, this is generally your social security number (SS)IG -	T	1]		ī		T	$\overline{}$		
reside	int alien, sole proprietor, or disregarded entity, see the instructions for	or Part I, later. For other				-		-					
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.													
-				Employer identification number									
	If the account is in more than one name, see the instructions for line of the Requester for guidelines on whose number to enter.	e 1. See also What Name a	See also What Name and 7 5			6	0 0	4	8 5	5			
Part II Certification													
Unde	penalties of perjury, I certify that:												
	number shown on this form is my correct taxpayer identification nu	, •					, .						
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and													
	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 exe	mpt from FATCA reporting	g is corre	ct.									
becau acqui	ication instructions. You must cross out item 2 above if you have bee se you have failed to report all interest and dividends on your tax return sition orbandonment of secured property, cancellation of debt, contri than interest and dividends, you are not required to sign the certification	n. For real estate transaction outions to an individual retir	ns, item 2 rement ar	doe range	s not emen	appl i (IRA	y. For m \), and, :	ortga genei	age inte ally, pa	rest p ymen	ts		
Sign Here		Đ	ate 2	1/4	1/0	25							
Ge	neral Instructions	New line 3b has be											
Section 1	on references are to the Internal Revenue Code unless otherwise	foreign partners, own	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										
relate	e developments. For the latest information about developments d to Form W-9 and its instructions, such as legislation enacted hey were published, go to www.irs.gov/FormW9.	regarding the status of beneficiaries, so that	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										
Wh	at's New	partners may be requ	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

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.