DO NOT SUBMIT FORM TO IRS- SUBMIT FORM TO REQUESTING AGENCY.

Saginaw Chippewa Indian Tribe
Substitute Form W-9: Request For Taxpayer Identification Number &

2/09 Revision	Certification and Instructions						
TYPE OR PRINT INFORMATION NEATLY. PLEASE READ INSTRUCTIONS BEFORE CONTINUING							
Part I: Vendor Information							
1. Legal Business Name (as entered with the IRS/this is the name that belongs with the tax ID # given): The Dunk Tank Company LLC							
If you are using a DBA, please enter below (name check to be payable to):							
3. Entity Type (See instructions): 区 Individual/Sole Proprietor 「 Partnership/Joint Venture		☐ Churc	☐ Governmental Entity ☐ Church or Church-Controlled Org. ☐ Non-Profit Corporation				
☐ Personal Service Corporat ☐ LLC-Check Tax Classificat	☐ Trust/	☐ Trust/Estate					
☐ Corporation		Y-120-00	Jnited States				
Part II: Taxpayer Identification Number (TIN) & Taxpayer Identification Type							
*YOUR TAXPAYER IDENTIFICATION NUMBER <u>MUST</u> MATCH WITH THE NAME IN PART I/BOX 1 (Legal Business Name) IRS WILL REJECT ANY MIS-MATCHED ITEMS AND PAYMENT WILL NOT BE INITIATED UNTIL CORRECTED.							
1. Enter your TIN here: (do not use dashes)	8 1	2 8	1310) 9	3_	3	
2. Taxpayer Identification Type : (check only one box) Social Security No. (SSN) Employer ID No. (EIN) Individual Taxpayer NO. (ITIN)							
Part III: Primary 1099 Ver		The state of the s			ation		
Number, Street, and Apartment or Suite Number		2. Remittance Address: Number, Street, and Apartment or Suite Number					
6210 Burningtree Dr City, State, and Zip code or Country		City, State, and Zip code or Country					
Burton, MI 48509							
Telephone # 810-221-1580		Telephone #					
3. Classification: Native-American Owned Somall Business (less than 500 Employees) 4. If vendor is a Saginaw Chippewa Tribal member provide Member ID #:							
Part IV: Exemption From Backup Withholding (If exempt from 1099 reporting, check one)							
corporate exemption Under for medical and healthcare payments or payments for legal services	Governmental Entity -						
Part V: 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 3. I am a U.S. person (including a U.S. resident alien). 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.							
Sign Signature of U.S. person: Date: 7/26/2023							
Print Name of signer: Joshua Jo	ohns	Telephone # 810-624-6820					

Saginaw Chippewa Indian Tribe Substitute Form W-9 Instructions

The Saginaw Chippewa Indian Tribe, like all other organizations that file an information return with the IRS, must obtain your correct Taxpayer Identification Number (TIN) to report income paid to yo or your organization. The Tribe uses a Substitute Form W-9 to obtain certification of your TIN in order to ensure accuracy of information contained in its payee/vendor database and to avoid backup withholding.* We ask for the information on the Substitute Form W-9 to carry out the Internal Revenue laws of the United States. You are required to give us the information.

Any vendor or other payee who wished to do business with the Saginaw Chippewa Indian Tribe (including the Soaring Eagle Resort and Casino, Saganing Eagles Landing Casino, Sagamok Shell Gastation, and the Ziibiwing Cultural Society) must complete the Substitute Form W-9. IRS Form W-will not be accepted unless using the October 2007 Revision.

Part I: Vendor Information

- Legal Business Name: For individuals, enter the name of the person who will do business
 with the Tribe as it appears on the Social Security Card or other required Federal tax
 documents. An organization should enter the name shown on its charter or other legal
 document creating the organization. Do not abbreviate names.
- 2. DBA (Doing Business As): Enter your DBA in the designated line, if applicable.
- 3. **Entity Type:** Mark the Entity Type of the individual or organization doing business with the Tribe. *If LLC is marked, please check the appropriate code for the tax classification ("D" for disregarded entity, "C" for corporation, "P" for partnership) in the space provided.

Part II: Taxpayer Identification Number (TIN) and Taxpayer Identification Type

- Taxpayer Identification Number: Enter your <u>nine</u> digit TIN (this number is numeric only). See the table and Special Note below for instructions on the type of taxpayer number you should report.
- 2. **Taxpayer Identification Type:** Mark the appropriate option. The following table gives the Taxpayer Identification Type appropriate for Each Entity Type.

Entity Type	Taxpayer Identification Type		
Non-Profit Corporation	. , , , , , ,		
Corporation	Employer Identification Number (EIN)		
Government	(==,,)		
Individual/Sole Proprietor/Single Owner LLC who does not have employees other than him or herself	Social Security Number (SSN)		
Individual/Sole Proprietor/Single Owner LLC who had employees other than him or herself			
Trust	Employer Identification Number (EIN)		
Joint Venture			
Partnership/Multiple Owner LLC	8		
Resident Alien/Non-Resident Alien**	Individual Tax Identification Number (ITIN)		
Non-United States Business Entity**	N/A		
Estate	Employee Identification Number (EIN)		

^{**} See Special Note Below.

Part III: Primary 1099 Vendor and Remittance Address

- 1. **Primary 1099 Vendor Address:** List the location where your 1099 tax information should be delivered, if applicable. Otherwise, provide your headquarters address.
- 2. **Remittance Address:** List the location where payments should be delivered. Please attach a separate sheet for additional addresses/locations.
- 3. Classification: Mark any appropriate option.
- 4. Saginaw Chippewa Indian Tribal Members: Enter your Alpha-Numeric Tribal Identification Number, ex. (M123456).