Request for Taxpayer Identification Number and Certification

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

Before	e yo	bu begin. For guidance related to the purpose of Form W-9, see <i>Purpose of Form</i> , below.			
	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the overtity's name on line 2.)	1, and enter the business/disregarded		
	2	Business name/disregarded entity name, if different from above.			
Print or type. Specific Instructions on page 3.		 Check the appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. Individual/sole proprietor C C corporation Partnership 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 classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check box for the tax classification of its owner. Other (see instructions) 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 in this box if you have any foreign partners, owners, or beneficiaries. See instructions 	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) (Applies to accounts maintained outside the United States.)		
See	5	5 Address (number, street, and apt. or suite no.). See instructions. Requester's name		and address (optional)	
	6	City, state, and ZIP code			
	7	List account number(s) here (optional)			
Par	t I	Taxpayer Identification Number (TIN)			
			Social sec	curity number	

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 entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also What Name and
Number To Give the Requester for guidelines on whose number to enter.

see How to get a	or									
	Employer identification number									
so What Name and			-							

Part II Certification

Under penalties 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 to be issued to me); and

- 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
- 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 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. See the instructions for Part II, later.

	Signature of
Here	U.S. person

General Instructions

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

Date

KANSAS HOUSING

Vendor Information

	Vender	mormation					
New Vendor	Change	e of Address	Change of Bar	nking Information			
Name							
FEIN/SS#	Unique Entity ID**						
Address							
City		State	Zip				
Telephone		FAX					
E-Mail for payment corresponde	ence						
** _	- Unique Entity ID is formerly kno	own as DUNS # - Please	provide Unique Entity	ID from Sam.gov.			
Requested Method or				U U			
	<u>r ayment.</u>		Credit card				
ACH/ EFT *** (Preferred M	1ethod) . Please complete ACH/I	EFT Payments section bel	 ow and attach a void∈	ed check.			
		F PAYMENTS ONLY	/.				
			General Ledger	Loan			
Account Type:			General Leuger				
Bank Name							
Branch (If applicable)							
City		State		Zip			
Transit/ABA #			Account #				
If the vendor selects ACH/EFT for the into the checking or savings account posted in error. This authority is to ro manner as to afford KHRC and the fir	at the financial institution named at emain in full force and effect until K	bove. KHRC is authorized to HRC has received written no	o initiate a correcting de	ebit (withdrawal) if a credit is			
***In order to strengthen in in the mailing process, w	iternal controls, ensure promp ve will administer payments th			c of checks being lost			
Attach Voided Check Here							
KHRC Internal Use:			tion				
Program/Purchasing Approval	Date Initials	SAM.gov Finance Verific	cation: ov verified (document:	ation attached)			
Finance Approval			ov N/A (credit card ve				

Revised 03/07/2025

Initials

Date