

**Request Invitation to Bid**

**ITB 25-06-3747SB  
Addendum to the ITB Version 1**

Navajo Nation Office of the Controller  
2559 Tribal Hill Drive, P.O. Box 3150  
Window Rock, Arizona 86515

**TO:** All Bidders

**FROM:** Rachel Williams – Project Manager  
Office Of the Controller

**DATE:** July 1, 2025

**RE:** ITB for Dell UltraSharp 49” Curved Monitors

You are hereby notified of Addendum One (1), for this ITB: 25-06-3747SB, Dell UltraSharp 49” Curved Monitors. This addendum reflects to clarification the correct current Dell UltraSharp Monitor. Quote must reflect Dell Monitor U4924DW.

1. Remove Dell UltraSharp 49 Curved Monitor U4919DW.
2. Add current Dell UltraSharp 49 Curved Monitor U4924DW.

**REQUIREMENT:**

Dell Ultra Sharp 49” Curved Monitor U4924DW, Desk Monitor:

- Brand – Dell
- Series: UltraSharp
- Model: UltraSharp U4924DW

Description	Quantity
Dell UltraSharp 49 Curved Monitor U4924DW	155
3-Year warranty and service support	1
Sales tax breakdown (if applicable)	1

All other terms and conditions remain the same.

Thank you.



## **Request Invitation to Bid**

Dell UltraSharp 49" Curved Monitors U4919DW  
ITB 25-06-3747SB

Navajo Nation Office of the Controller  
2559 Tribal Hill Drive, P.O. Box 3150  
Window Rock, Arizona 86515

**DATE:** July 1, 2025

**PROJECT TITLE:** The Navajo Nation Office of the Controller is requesting for proposals for Dell Ultrasharp 49" Curved Monitors, U4919DW, including (3) year warranty support coverage.

**PROPOSAL DUE DATE:** July 21, 2025, 3:00 PM (MST)

**CONTACT PERSON:** Rachel Williams, Project Manager  
Phone Number: (928) 871-7654  
[Email: rwilliams@nnooc.org](mailto:rwilliams@nnooc.org)

**DELIVER TO:** Office of the Controller  
2559 Tribal Hill Drive  
P.O. Box 3150  
Window Rock, AZ 86515  
Attn: Rachel Williams

### **TIMELINE**

The following timeline has been established in anticipation of a contract award; however, the timeline shall be subject to change at the sole discretion of Navajo Nation Office of the Controller (NNOOC) management as deemed necessary and beneficial to the Navajo Nation. The timelines below do not commit the NNOOC to award a contract in relation to this ITB.

Question submission deadline:	Thursday, July 18, 2025, by 3:00 p.m. MDT
ITB submission deadline:	Monday, July 21, 2025, by 3:00 p.m. MDT
Anticipated Notice of Intent to Award:	Thursday, August 15, 2025

**DESCRIPTION:** The Navajo Nation is located in Arizona, New Mexico, and Utah, and has its primary government headquarters in Window Rock, AZ. Located in Window Rock, AZ, the Office of the Controller (OOC) under the Division of Finance

- A. **ISSUING OFFICE:** This Request for Invitation to Bid (ITB) is issued by the Navajo Nation Office of the Controller (NNOOC), Division of Finance, Navajo Nation, P.O. Box 3150, Window Rock, Arizona. The contact person for this ITB is Mrs. Rachel Williams, Project Manager, NNOOC.
- B. **PURPOSE:** The Office of the Controller (OOC) FMIS System Office is soliciting quotes on behalf of the OOC to establish have no included third party software such as MS Office license, antivirus, management, etc. a one-time purchase of computer equipment as outlined below.
- C. **SCOPE:** This ITB contains the instructions governing the proposal to be submitted and the material to be included therein; mandatory requirements which must be met to be eligible for consideration; After hour support, NNOOC will be needing after hour support if needed, this support will include but not limited to troubleshooting, hardware issues and will need assistance to resolve these issues with little downtime as possible and other requirements to be met by each proposal.
- D. **PROCUREMENT OF ITB:** This procurement shall be conducted in accordance with all applicable Navajo Nation laws and regulations including the [Navajo Business Opportunity Act](#) All applicable rules, regulations, and laws shall also be followed. Prospective Vendors shall familiarize themselves with Navajo Nation Procurement Rules and Regulations ([BFD-192-03](#)) prior to submitting responses to this ITB, and may download a copy of the regulations from the Office of the Controller website at any time up to the Deadline for Proposals from the following link: [Purchasing Section \(nnooc.org\)](#)
- E. **SCHEDULE OF ACTIVITIES / DEADLINE:**  
Advertisement Date: July 1, 2025  
Proposal Due Date: July 21, 2025
- F. **INQUIRIES:** Prospective respondents shall make written questions concerning this ITB to obtain clarification of requirements through e-mail to Mrs. Rachel Williams, Project Manager, NNOOC at [rwilliams@nnooc.org](mailto:rwilliams@nnooc.org) inquiries will be accepted after the inquiry deadline listed in section E. Format each email submitting a question must be titled using the following email subject naming convention: "QUESTION on ITB 25-06-3747SB Dell UltraSharp Curved Monitors."
- G. **ADDENDUM OF SUPPLEMENT TO THIS REQUEST FOR PROPOSAL:** In the event that it becomes necessary to revise any part of this ITB, an addendum will be issued.

- H. **PROPOSAL SUBMISSION:** Proposal must be received on or before 3:00 p.m., July 21, 2025 (MDT). Respondents who are mailing their proposals should allow sufficient time for mail delivery to ensure receipt by the time specified. If mailed, it is recommended that proposals be sent by certified mail to the address indicated on the cover sheet of the ITB. **Late proposal will not be accepted.**
- I. **TWO SETS OF THE PROPOSAL ARE REQUIRED:** One (1) Original and three (1) copies of the proposal must be delivered in a sealed envelope. The outside of the envelope should be clearly marked with the project name- **“Dell UltraSharp Curved Monitors”** and the name and address of the firm submitting the proposal. **Proposal not clearly marked will not be accepted.**  
(No exceptions will be made)
- J. **REJECTION OF PROPOSALS:** NNOOC reserves the right to reject any and all proposals. This ITB may be canceled at any time and all proposals may be rejected in whole or in part when the NNOOC Department Director determines it is in the best interest of the Navajo Nation.
- K. **PROPRIETARY INFORMATION:** Any restriction on the use of data contained within any proposals must be clearly stated in the proposal itself. Proprietary information submitted in response to this ITB will be handled in accordance with applicable purchasing procedures. Each and every page of the proprietary material must be labeled or identified with the word “proprietary”.
- L. **RESPONSE MATERIAL OWNERSHIP:** All material submitted regarding this ITB shall become the property of The Navajo Nation and will not be returned to the respondent. Responses received will be retained by NNOOC and may be reviewed by any person after final selection has been made, subject to paragraph I above. NNOOC has the right to use any or all system ideas presented in reply to this ITB, subject to limitations in paragraph I above. Disqualification or non-selection of a respondent or proposal does not eliminate this right.
- M. **INCURRING COSTS:** NNOOC is not liable for any cost by the respondents prior to issuance of a contract.
- N. **ACCEPTANCE TIME:** NNOOC intends to make a vendor selection within two weeks after the closing date for receipt of proposals.
- O. **SUFFICIENT APPROPRIATION:** A contract awarded as a result of this ITB is contingent upon the availability of funds. A contract may be terminated or reduced in scope if sufficient funds do not exist. Sending written notices to the Vendor shall affect such termination or reduction in scope. The NNOOC Department Director’s decision to terminate or reduce the scope due to insufficient appropriations shall be accepted as final by the Vendor.
- P. **JOINT PROPOSALS:** Nothing in this ITB shall be construed to prohibit vendors from entering into a consortium for the purpose of offering a proposal in response to this ITB. Parties to a consortium will not be permitted independent, individual proposals in response to this ITB.

**Q. Cost Proposal Contents:**

Costs must be submitted in a separately sealed envelope for hard copy submissions, or in a separately labeled attachment for electronic submissions, and should include detailed breakdown of costs for each of the following line items:

Description	Quantity
Dell UltraSharp 49" Curved Monitors U4919DW	155
3-Year warranty and service support	1
Sales tax breakdown (if applicable)	1

**R. EVALUATION PROCEDURES AND CRITERIA.**

- An evaluation team will judge the proposals received in accordance with the general criteria used herein. Respondents should be prepared to provide any additional information the team feels necessary for the fair evaluation of proposals.
- Failure of a respondent to provide any information requested in the ITB may result in disqualification of the proposal. All proposals must be endorsed with the signature of a responsible official having the authority to bind the respondent to the execution of a contract.
- The sole objective of the review team will be to select the respondent who is most responsive to the needs of NNOOC. The specifications in this ITB represent the minimum performance necessary for a response. On the basis of the evaluation criteria established in this ITB, the review team will select and recommend the respondent who best meets this objective. If there is only one responsive bid, the NNOOC Department Director may elect to evaluate ITB solely.
- Each bid must be accompanied by a letter of transmittal. The letter of transmittal must:
- Provide Statements of Qualifications.
- Proposal for Dell Ultrasharp 49" Curved Monitor U4919DW must provide cost breakdown.
- Product Specifications
- Identify the name of the person responding to the ITB.
- Identify the name, title, and telephone numbers of person authorized to negotiate on behalf of the organization.
- Identify the names and telephone numbers of person to be contacted for clarification.
- Navajo Preference, Certificate of Eligibility issued by the Navajo Business Regulatory Department if any.
- Required insurance documents, i.e. Certificate of Liability Insurance
- Completed and signed with the latest date W-9 Form (REV March 2024)
- Completed and Signed Navajo Nation Certification Regarding Debarment and Suspension
- Explicitly indicate acceptance of the conditions governing this procurement.
- Be signed by the person responding to the ITB; and
- Acknowledge receipt of any and all amendments to the ITB.

- S. **Evaluation Criteria:** The following criteria will be used by an ad-hoc committee in the selection process for contract award. Vendors and proposals will be evaluated to determine the best opportunity for NNOOC.

Initial Point Criteria:

Evaluation Criteria	
Priority 1 or 2 vendor a. Priority One vendor (5 pts.) b. Priority Two vendor (3 pts.) c. Non-Priority vendor (0 pts.)	5
Letter of Transmittal a. Provide Statements of Qualifications. b. Identifying individual(s) as specified above. c. List of similar services provided to other business customers on Navajo Nation in proportion requested to support maintenance.	25
Proposal for Dell Ultrasharp 49" Curved Monitors U4919DW a. Provide premium warranty cost breakdown b. Support and Maintenance, hour response, support call number for hour and after hours. c. Onsite Service with Emergency Dispatch, ProSupport for hours and after hours.	70
	100

- T. **STANDARD CONTRACT:** The Navajo Nation reserves the right to incorporate standard contract provision into any contract negotiations as a result of a proposal submitted in response to the ITB.
- U. **TAX:** All appropriate taxes should be **included in the cost of services including the Navajo Sales Tax**. All work performed within the territorial jurisdiction of the Navajo Nation is subject to the **Navajo Sales Tax of 6%** (24 N.N.C. Section 601 et. seq.).
- V. **TERM:** The term of this contract will be for a period of **1 year** from the date of award.
- W. **SOVEREIGNTY:** The Navajo Nation will not relinquish any of its sovereignty rights.
- X. **COMPLIANCE WITH LAWS AND REGULATIONS:** The successful Vendor shall comply with all Federal, Tribal, State, and Local laws, regulations and Navajo Nation rules and policies pertaining to work under its charge, and shall, at its expense, procure any permits that may be required.
- Y. **INDEMNIFICATION:** To the fullest extent permitted by law, or as otherwise defined in the Contract, the successful Vendor shall indemnify and hold harmless the Navajo Nation and its officials, employees and agents from and against all claims, liens or demands that result in losses, liabilities, defense costs and expenses (including but not limited to attorney's fees and costs of litigation) arising out of the term, conditions and performance under the contract. The Vendor further agrees to indemnify and hold harmless the Navajo Nation, its agents, or employees, against claims or liability arising from or based upon the violation of any federal, state, county, city, or other applicable laws, bylaws, or regulations by the Vendor, its agents, associates, or employees.

The indemnification provided above shall obligate the Vendor to defend at its own expense or to provide for such defense, at the Navajo Nation's option, of any and all claims of liability and all suits and actions of every name and description that may be brought against the Navajo Nation which may result from the operations and activities under any Contract resulting from this ITB. The award of this Contract to the Vendor shall obligate the Vendor to comply with the foregoing indemnity provision.

NNOOC is soliciting a proposal for a total of 155 Dell Curved 49" Monitors and warranty support services for (3) years, listed below.

1. **PURPOSE AND SCOPE:** The Office of the Controller (OOC) FMIS System Office is soliciting quotes on behalf of the OOC to establish have no included third-party software such as MS Office license, antivirus, management, etc. A one-time purchase of computer equipment as outlined below.
2. **REQUIREMENTS:** The following are the requirements for the ITB.

**2.1 Dell Ultra Sharp 49" Curved Monitor U4919DW, Desk Monitor**

- Display: 49 in, IPS, W-LED, 5120 x 1440 pixels
- Viewing angles (H/V): 178 degrees / 178 degrees
- Brightness: 350 cd/m2
- Static contrast: 100:1
- Refresh rate: 24 Hz – 86 Hz
- sRGB: 99 %, Adobe RGB: 75%, NTSC: 72%
- Dimensions: 1215.1 x 371 x 109.3 mm
- Weight: 11.4 kg (25.13 lbs)
- Width: 1215.1 mm (47.8386 in. 3.9865 ft)
- Depth: 109.3 mm (4.3031 in, 0.3586 ft)
- Power Consumption: 60 W
- Response Time: 5 ms

Brand, series, model:

- Brand – Dell
- Series: UltraSharp
- Model: UltraSharp U4919DW
- Model Year: 2018 or earlier

Display:

- Size class: 49 in (inches)
- Diagonal:
  - 1244.6 mm (millimeter)
  - 124.46 cm (centimeters)
  - 49 in (inches)
  - 4.0833 ft (feet)

- Coating: Anti-glare/Matte (3H)
- Colors: Black

Camera

- Information about whether the current model has a built-in camera
- If camera available: Option Yes

Certificates, standards and licenses

- Certificates, standards and licenses: ENERGY STAR 7.0
- RoHS
- TCO Certified Displays

Accessories

- DisplayPort cable
- HDMI cable
- USB 3.0 upstream cable
- USB Type-C cable

Additional features

- Security lock slot

Warranty & Maintenance Support: 3-year term or best offer.

- ProSupport Plus: Mission Critical, 7x24, Tech Support and Assistance ProSupport
- Plus Mission Critical 4-Hour 7x24
- Coverage dates 9/30/2025 to 5/24/2027

## **USE AND DISCLOSURE**


Information contained in this document, as well as any additional information gathered in subsequent communications related to this process are proprietary to the Navajo Nation and must be treated by interested parties and responding entities as confidential. The information is to be used only for the purposes of preparing a response to this solicitation. The information in this document may not be disclosed to other parties or to your employees or representatives except on a need-to-know basis for purposes of preparing a response to this solicitation.



**NAVAJO NATION CERTIFICATION  
Regarding Debarment, Suspension, and  
Contracting Eligibility**

1. Applicant entity acknowledges that to the best of its knowledge that the Applicant entity, either in its present form or in any identifiable capacity, has not, in accordance with 12 N.N.C. § 361:
  - A. Been convicted of the commission of criminal offenses incident to obtaining or attempting to obtain a public or private contract or subcontract, or in the performance of any such contract or subcontract;
  - B. Been convicted of embezzlement, theft, forgery, bribery, falsification or destruction of records, receiving stolen property, or other offenses indicating a lack of business integrity or honesty, which currently, seriously, and directly affect responsibility as a Navajo Nation contractor;
  - C. Been convicted under antitrust statutes arising out of the submission of bids or proposals;
  - D. Violated contract provisions, including:
    - i. Deliberate failure, without good cause, to perform in accordance with the contract specifications or within the time limit provided in the contract,
    - ii. A recent record of failure to perform or of unsatisfactory performance with the terms of any contract, or
    - iii. Any other cause so serious and compelling as to affect responsibility as a Navajo Nation contractor, including debarment by another governmental entity.
2. Applicant acknowledges that if the Navajo Nation determines that the executed Certification provided herein is untrue or not wholly accurate, it shall be grounds for the Navajo Nation to terminate the contract and pursue other legal remedies, at the Navajo Nation's discretion.
3. Applicant certifies to the best of its knowledge that it is eligible to do business with the

Navajo Nation, in its present form or in any other identifiable capacity, pursuant to 12 N.N.C. § 1501 and 5 N.N.C. § 301. Applicant also acknowledges that per 12 N.N.C. § 1505, it will not be eligible to contract with the Navajo Nation if deemed ineligible by the appropriate department or entity of the Navajo Nation which receives the Applicant's request for consideration for a business opportunity.

<div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px;"></div>	<div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px; margin-bottom: 5px;"></div> <div style="border: 1px solid red; height: 20px; width: 270px;"></div>
<p>Applicant Name</p> <p>Applicant Address</p> <p>Applicant Address</p> <p>Applicant Address</p>	<p>Name of individual signing on Applicant's behalf (print)</p> <p>Title of individual signing on Applicant's behalf</p> <p> Signature of individual signing on Applicant's behalf</p> <p>Date</p>

<b>Form W-9</b> (Rev. March 2024) Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer Identification Number and Certification</b> Go to <a href="http://www.irs.gov/FormW9">www.irs.gov/FormW9</a> for instructions and the latest information.	Give form to the requester. Do not send to the IRS.
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**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<table style="width: 100%;"> <tr> <td style="width: 70%;"> <b>1</b> 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.)   <b>2</b> Business name/disregarded entity name, if different from above.   <b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor    <input type="checkbox"/> C corporation    <input type="checkbox"/> S corporation    <input type="checkbox"/> Partnership    <input type="checkbox"/> Trust/estate  <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . .  <b>Note:</b> 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.  <input type="checkbox"/> Other (see instructions) . . . . .  <b>3b</b> 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 . . . . . <input type="checkbox"/> </td> <td style="width: 30%;"> <b>4</b> 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) . . . . .   <i>(Applies to accounts maintained outside the United States.)</i> </td> </tr> <tr> <td> <b>5</b> Address (number, street, and apt. or suite no.). See instructions.   <b>6</b> City, state, and ZIP code   <b>7</b> List account number(s) here (optional)         </td> <td>           Requester's name and address (optional)         </td> </tr> </table>	<b>1</b> 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.)  <b>2</b> Business name/disregarded entity name, if different from above.  <b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . <b>Note:</b> 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. <input type="checkbox"/> Other (see instructions) . . . . . <b>3b</b> 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 . . . . . <input type="checkbox"/>	<b>4</b> 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) . . . . .  <i>(Applies to accounts maintained outside the United States.)</i>	<b>5</b> Address (number, street, and apt. or suite no.). See instructions.  <b>6</b> City, state, and ZIP code  <b>7</b> List account number(s) here (optional)	Requester's name and address (optional)
<b>1</b> 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.)  <b>2</b> Business name/disregarded entity name, if different from above.  <b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . <b>Note:</b> 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. <input type="checkbox"/> Other (see instructions) . . . . . <b>3b</b> 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 . . . . . <input type="checkbox"/>	<b>4</b> 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) . . . . .  <i>(Applies to accounts maintained outside the United States.)</i>				
<b>5</b> Address (number, street, and apt. or suite no.). See instructions.  <b>6</b> City, state, and ZIP code  <b>7</b> List account number(s) here (optional)	Requester's name and address (optional)				

**Part I Taxpayer Identification Number (TIN)**

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.

<b>Part II Certification</b> 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.	<table style="width: 100%;"> <tr> <td> <b>Social security number</b>  <div style="border: 1px solid black; padding: 2px;"> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="display: flex; justify-content: space-between; border-top: 1px solid black; padding-top: 2px;"> <span>-</span> <span>-</span> </div> </div> </td> <td> <b>Employer identification number</b>  <div style="border: 1px solid black; padding: 2px;"> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="display: flex; justify-content: space-between; border-top: 1px solid black; padding-top: 2px;"> <span>-</span> </div> </div> </td> </tr> </table>	<b>Social security number</b> <div style="border: 1px solid black; padding: 2px;"> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="display: flex; justify-content: space-between; border-top: 1px solid black; padding-top: 2px;"> <span>-</span> <span>-</span> </div> </div>	<b>Employer identification number</b> <div style="border: 1px solid black; padding: 2px;"> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="display: flex; justify-content: space-between; border-top: 1px solid black; padding-top: 2px;"> <span>-</span> </div> </div>
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**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.

<b>Sign Here</b>	Signature of U.S. person	Date
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**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](http://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