

Infectious Disease Outbreaks: Enhancing Forecasting and Analytics Capabilities for Local Health Departments (LHDs)

Fort Bend County Health & Human Services

Application Cover Page:

- Applicant organization name: **Fort Bend County**
- Address: **301 Jackson Street, Richmond, TX, 77469**
- Size of jurisdiction served is: **500,000 or more people**
- Fort Bend County, located in Texas, is a diverse and rapidly growing community known for its cultural richness, economic development, and expanding population. Fort Bend County is one of the most populous counties in Texas. The population has been steadily growing due to its proximity to the City of Houston and its appeal as a suburban area with a mix of urban and rural landscapes. Currently, Fort Bend has a population estimate of 889,146. The most common languages spoken in Fort Bend County other than English include Spanish, Chinese, Urdu, Vietnamese, and other Asian languages. 28.6% of Fort Bend County's population were born outside the United States.
- Characteristic of jurisdiction: **Mixed, suburban/rural**
- Characteristics include cultural diversity, economic growth, education, and housing. The county is celebrated for its cultural diversity, with a significant representation of various racial, ethnic, and cultural backgrounds. This diversity is reflected in its residents, businesses, and community activities. Throughout the last few years, Fort Bend has experienced robust economic development, attracting both corporate headquarters and small businesses. Its strategic location near Houston's energy and healthcare industries contributes to its economic vitality. The county is home to well-regarded school districts that contribute to its reputation as an education hub. Fort Bend offers a range of housing options, from suburban neighborhoods to rural communities, accommodating the preferences of its diverse population.
- Jurisdictions served by the LHD;
- The jurisdiction is Fort Bend County which includes the cities of Sugar Land, Missouri City, Richmond, Rosenberg, Stafford, Fulshear, Meadows Place, Katy, Needville, Simonton, Thompsons, Fresno, Arcola, Beasley, Kendleton, Orchard, Pearland, Pleak, and Fairchilds.
- Name, phone number, and email for primary and secondary points of contact for the project.
- Nicolette Janoski, Epidemiology Division Manager, 832-600-9785,
Nicolette.Janoski@fortbendcountytexas.gov
- Charles Brockett, PHEPR Division Manager, 281-238-3551,
Charle.Brockett@fortbendcountytexas.gov
- Signature Authority: KP George, County Judge, 281-341-8608,
County.Judge@fortbendcountytexas.gov
- Responses to the following two questions:
- Do you have prior experience in Federal Contracting?: **Yes**
- Have you completed a Single Audit?: **Yes**

Project Narrative

Jurisdiction Need

Over the past decade Fort Bend County has grown more than 45% (2010-2021). The county is made up of a very diverse population with many languages being spoken. Fort Bend County, along with the neighboring jurisdictions, the State of Texas and federal agencies, often collaborate to conduct disease forecasting and analytics. This involves collecting and analyzing data on disease prevalence, trends, and transmission patterns. Forecasting models can project the potential number of cases, hospitalizations, and deaths based on various scenarios. That data is then communicated to county officials, the public and healthcare providers to guide decision making. Currently, Fort Bend County is using Geographic Information Systems Mapping (GIS), National Electronic Disease Surveillance System (NEDSS), ESSENCE, Fort Bend County school influenza surveillance systems and SouthEast Texas Regional Advisory Council (SETRAC) data for disease analytics and forecasting. The challenges we continue to face is forecasting and enhancing preparedness planning and response capabilities for respiratory infectious disease to meet the needs of the growth and diversity of our changing population. Preparedness planning can be challenging due to a number of factors such as data quality, availability of data, model complexity, limited staff time, lack of trained staff, resource allocation, the response of the community to public health guidance, changing pathology of the disease and efficacy of pharmaceutical intervention, such as vaccines. Fort Bend County plans to begin to bridge the gaps by integrating CDC/ATSDR Minority Health Social Vulnerability Index with disease surveillance data. This will allow us to identify potential hotspots where the combination of high social vulnerability and disease prevalence could lead to disproportionate impacts. This analysis will guide targeted risk communications, resource allocation, vaccine distribution and outreach, and community engagement in those areas of need. The ability to forecast disease transmission patterns and scope of an epidemic or pandemic will greatly strengthen the County's emergency planning and response to the public health emergencies that are likely to be faced in the future. The project aligns with the organization's commitment to proactive disease prevention and preparedness. It builds upon past data collection and reporting efforts, leveraging existing resources and knowledge. Fort Bend County seeks to integrate forecasting capabilities into its routine operations post-project, which will enhance its overall public health capacity.

Implementation Capacity

Fort Bend County participates in many grant-funded initiatives, from the core public health programs such as immunizations and tuberculosis prevention and control to innovative programming such as the Medicaid Transformation 1115 Waiver. The health department collaborates with many community partners, including the healthcare sector, school districts, non-profit organizations, academic institutions, and philanthropic organizations. Internally, the health department encourages cross-collaboration with the various Divisions of the department, including Epidemiology, Public Health Emergency Preparedness and Response, Clinical Health Services, Social Services, Communications, Education and Engagement, and EMS. The County infrastructure is supportive of the health department seeking funds to improve capacity and improve the health of the community. In addition to the local organizations, Fort Bend County is an active participant with other neighboring health department jurisdictions, the regional office of the state health department, and the Texas Department of State Health Services (DSHS) which is the state health department for Texas.

Fort Bend County envisions creating a dedicated project team with the following roles and responsibilities:

1. Team Lead (Deputy Medical Director and Epidemiology Division Manager): Responsible for overseeing the entire project, managing timelines, resources, and communication between team members and stakeholders.
2. Emergency Response Coordinator (Public Health Emergency Preparedness and Response Division Manager): Responsible for updating the emergency response plans and procedures based on the flow of analytics and disease forecasting.
3. Disease Forecaster/Analyst (Senior Health Data Analyst and Epidemiologist II): Leads the data analysis and modeling efforts, using historic disease data, environmental factors, and population movement to develop predictive models
4. Data Specialist (Data Analyst and GIS Analysis): Manages data collection, cleaning, and preprocessing. Implements machine learning algorithms and data visualization to generate insights from the collected data.
5. Communications (Health Communications, Equity & Engagement Director): Develops strategies for effective communication of forecasts to the public, policymakers, and healthcare providers.
6. IT/Technical Support (IT PMO): Manages the technical infrastructure required for data storage, analysis, and reporting. Ensures data is secure and systems are reliable.
7. Partnership Liaison (Preparedness Epidemiologist): Responsible for coordinating with external partners such as the State Health Department and other local public health departments, Academic Institutions and Community organizations.

Each team member will be accountable for their respective roles, ensuring timely execution and quality outcomes. The project manager holds overall accountability for project success, reporting to higher management and ensuring alignment with Fort Bend County HHS strategic goals.

Project Goals and Priorities

Over the 8-month span of the project Fort Bend will

- Activities Months 1-2
 - Recruit and onboard project team members
 - Create a training plan for forecasting and analysis by assessment of current staff skills, training needs analysis, tailored training, seeking external expertise, conducting internal workshops, creating online learning resources, mentoring and coaching, hands-on projects, regular skill assessments, creating documentation and resource center, evaluations and feedback.
- Progress Measures Months 1-2
 - Completion of team recruitment and onboarding
 - Implement the training plan for team members
 - 100% participation in monthly communication calls with NACCHO partners
 - 80% of local team members participating in each communication call
- Activities Months 2-6
 - Conduct analysis of our current capability related to data collection, analysis, and visualization. This will be done by defining our objectives and scope, developing a

framework, gathering information, assessing data collection, evaluating data analysis, reviewing data visualizations, examining communication strategies, identifying strengths and gaps, researching best practices, creating recommendations and actions plans, implementing new strategies and reevaluation of the process.

- Develop data collection and data cleaning plans for forecasting models for future disease outbreaks.
- Create, enhance, and adapt current process by evaluating new tools such as Healthmap, BlueDot, ProMED-mail, Metabiota, AIME (Artificial Intelligence in Medial Epidemiology), Epidemico, Predictive analytics for humanitarian crises, Prognosis platform, Watson Decision Platform, DisasterAWARE, AIDR (artificial intelligence for disaster response), Sickweather and other machine learning and data analytics to forecast disease outbreaks and trends.
- Progress Measures Months 2-6
 - Establish technical infrastructure for data related tasks
 - Development of predictive models
 - Collaboration with Epidemiology staff and validation of models
 - Generation of actionable insight for disease outbreak prediction
 - 100% participation in monthly communication calls with NACCHO partners
 - 80% of local team members participating in each communication call
- Activities Months 6-8
 - Updating preparedness plans and standard operating procedures to reflect new forecasting and analytics capabilities.
 - Develop a communications plan that includes identifying the audience, defining our communication goals, crafting clear and concise messages, selecting appropriate communication channels, adapting the message to meet specific needs and concerns of the different audience groups, establishing a communication team, creating a communication timeline, creating a communication protocol, addressing misinformation, training communications team on how to affectedly conveying forecasting and analytics messages, monitoring and evaluation of communications, engaging stakeholders, providing public resources, and collaborating with the media.
- Progress Measures Months 6-8
 - Selection of communication channels and creation of draft, tailored messages
 - Identification of target audiences and key messages
 - Documented lessons learned, updates to preparedness plans and SOP
 - Assessment of forecasting models, insights, and communication strategies
 - 100% participation in monthly communication calls with NACCHO partners
 - 80% of local team members participating in each communication call

In addition, Fort Bend County will participate with NACCHO by:

- Joining the Disease Forecast and Outbreak Analytics Community of Practice
- Participating in evaluation-related activities to track and progress toward project outcomes
- Participating in a Tabletop Simulation at the Preparedness Summit 2024 in Cleveland, Ohio
- Completing a final report detailing successes, challenges, and lessons learned.

LINE-ITEM BUD*Fort Bend**Infectious Disease Outbreaks: Enhancing Forecasting and*

Line Items	Amount Requested through June 30, 2024
Personnel (Name)	
	\$ -
	\$ -
	\$ -
	\$ -
Personnel Subtotal	\$ -
Fringe Benefits (X%)	\$ -
Travel	
AMIA Informatics Summit Boston, MA March 2024 For 3 FTE Flight \$1000 (\$500 each), Hotel \$300 a night (4 night per FTE), Per Diem per FTE \$528 (\$48 for full day and \$36 on travel days) , Estimated conference fee \$1000 per FTE, incidentals, other unexpected expenses \$200 per FTE	\$ 7,856.00
CSTE Annual Conference Pittsburg, PA June 25-29 2024 For 4 FTE Flight \$500 per FTE, Hotel \$300 a night (5 night per FTE), Per Diem per FTE \$624 (\$48 for full day and \$36 on travel days) , Estimated conference fee \$1000 per FTE, other unexpected expenses \$200 per FTE	\$ 13,296.00
Texas Public Health Association Location TBA May 22-24 2024 Mileage reimburse , Hotel \$190 a night (4 night per FTE), Per Diem per FTE \$200 (\$36 for full day and \$27 on travel days) , Estimated conference fee \$325 per FTE, other unexpected expenses \$200 per FTE	\$ 2,010.00
Texas Health Informatics Alliance Conference Houston, TX Conference fee and Mileage reimburse	\$ 200.00
	\$ -
	\$ -
Travel Subtotal	\$ 23,362.00
Equipment	
QTY 3 @ \$400 each SAMSUNG Galaxy Tab A8 10.5"	\$ 1,200.00

QTY 4 @ \$250 each Wireless Mobile Color Printer	\$	1,000.00
Projector, 2023 Upgraded Mini Projector, Compatible with HDMI/USB/V	\$	200.00
Document Scanner, Up to 200 Sheets Feed Tray	\$	2,000.00
Equipment Subtotal	\$	4,400.00
Supplies		
Promotional items	\$	11,238.00
	\$	-
	\$	-
	\$	-
	\$	-
Supplies Subtotal	\$	11,238.00
Contractual Costs		
Contractual Subtotal	\$	-
Other		
Vitaysis or similar vendor such as Redcap	\$	30,000.00
Coursera for teams for 10 users @\$400 per user	\$	4,000.00
Survey Tool (such as Qualtrics, Survey Monkey, survey sparrow)	\$	2,000.00
	\$	-
Other Subtotal:	\$	36,000.00
Other		
	\$	-
	\$	-
	\$	-
	\$	-
Other Subtotal:	\$	-
Subtotals of Direct costs	\$	75,000.00
Indirect (X%)	\$	-
Grand Total	\$	75,000.00

County
d Analytics Capabilities for Local Health Departments

[illegible]

Printers will be used for printing while in the field.

This projector will be used for presentations and staff training.

This will allow us to scan large medical records and extract data from those records.

Will be used for items that promote infectious disease reporting and compliance with disease reporting laws.

Enhancements to the School-based surveillance of acute infectious disease system
Data Analysis and Disease forecasting training

Fort Bend County
Infectious Disease Outbreaks: Enhancing Forecasting and Analytics Capabilities for LHDs
Budget Justification

Personnel		\$0
Fringe Benefits		\$0
Travel		\$23,362
<u>AMIA Informatics Summit</u> – Boston – March 2024	\$7,856	
3 employees to attend to receive training in bioinformatics, public health informatics, data science and artificial intelligence		
<u>CSTE Annual Conference</u> – Pittsburgh – June 2024	\$13,296	
4 employees to attend to enhance knowledge and improve surveillance and epidemiology skills. Learning best practices for applied epidemiology and data analysis		
<u>Texas Public Health Assoc. Annual Conf.</u> – Galveston – May 2024	\$2,010	
2 employees to attend to collaborate with other public health staff in Texas and share the health informatics work accomplished		
<u>Texas Health Informatics Conference</u> – Houston	\$200.00	
Share and collaborate with the health informatics community in Houston		
Equipment		\$4,400
<u>Samsung Galaxy Tab A8 10.5”</u> 4 @ \$400	\$1,200	
For field survey and case investigations providing real time data during an event		
<u>Wireless Mobile color Printer</u> 4 @ \$250	\$1,000	
For printing data and reports while in the field		
<u>Mini-Projector</u> 1 @ \$200	\$200	
For presentations and staff training		
<u>Document Scanner</u> 1 @ \$2,000	\$2,000	
To scan large medical records for data extraction		
Supplies		\$11,238
<u>Promotional Items</u>	\$11,238	
To encourage reporting of communicable diseases and compliance with laws		
Contractual		\$0
Other		\$36,000
<u>VitaSys</u> or similar vendor	\$30,000	
Enhancements to school based surveillance		
<u>Coursera for Teams</u> 10 users @ \$400	\$4,000	
Data Analysis and Disease Foreecasting		
<u>Survey Tool</u> (e.g. Qualtrics, Survey Monkey, survey sparrow)	\$2,000	
Indirect Costs		\$0
<u>Total Budget Request</u>		<u>\$75,000</u>



FORT BEND COUNTY

Unique Entity ID MJG8N8EPN2L3	CAGE / NCAGE 5HHK4	Purpose of Registration Federal Assistance Awards Only
Registration Status Active Registration	Expiration Date May 17, 2024	
Physical Address 301 Jackson ST Richmond, Texas 77469-3108 United States	Mailing Address 301 Jackson ST Richmond, Texas 77469-3108 United States	

Business Information

Doing Business as (blank)	Division Name (blank)	Division Number (blank)
Congressional District Texas 22	State / Country of Incorporation (blank) / (blank)	URL (blank)

Registration Dates

Activation Date May 19, 2023	Submission Date May 18, 2023	Initial Registration Date Aug 13, 2021
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Entity Dates

Entity Start Date Dec 29, 1837	Fiscal Year End Close Date Sep 30
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Immediate Owner

CAGE (blank)	Legal Business Name (blank)
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Highest Level Owner

CAGE (blank)	Legal Business Name (blank)
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Executive Compensation

In your business or organization's preceding completed fiscal year, did your business or organization (the legal entity to which this specific SAM record, represented by a Unique Entity ID, belongs) receive both of the following: 1. 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements and 2. \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

No

Does the public have access to information about the compensation of the senior executives in your business or organization (the legal entity to which this specific SAM record, represented by a Unique Entity ID, belongs) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

Not Selected

Proceedings Questions

Is your business or organization, as represented by the Unique Entity ID on this entity registration, responding to a Federal procurement opportunity that contains the provision at FAR 52.209-7, subject to the clause in FAR 52.209-9 in a current Federal contract, or applying for a Federal grant opportunity which contains the award term and condition described in 2 C.F.R. 200 Appendix XII?

Yes

Does your business or organization, as represented by the Unique Entity ID on this specific SAM record, have current active Federal contracts and/or grants with total value (including any exercised/unexercised options) greater than \$10,000,000?

Yes

Within the last five years, had the business or organization (represented by the Unique Entity ID on this specific SAM record) and/or any of its principals, in connection with the award to or performance by the business or organization of a Federal contract or grant, been the subject of a Federal or State (1) criminal proceeding resulting in a conviction or other acknowledgment of fault; (2) civil proceeding resulting in a finding of fault with a monetary fine, penalty, reimbursement, restitution, and/or damages greater than \$5,000, or other acknowledgment of fault; and/or (3) administrative proceeding resulting in a finding of fault with either a monetary fine or penalty greater than \$5,000 or reimbursement, restitution, or damages greater than \$100,000, or other acknowledgment of fault?

No

Exclusion Summary

Aug 31, 2023 06:34:19 PM GMT
<https://sam.gov/entity/MJG8N8EPN2L3/coreData?status=Active>

Active Exclusions Records?

No

SAM Search Authorization

I authorize my entity's non-sensitive information to be displayed in SAM public search results:

Yes

Entity Types

Business Types

Entity Structure U.S. Government Entity	Entity Type US Local Government	Organization Factors (blank)
Profit Structure (blank)		

Socio-Economic Types

Check the registrant's Reps & Certs, if present, under FAR 52.212-3 or FAR 52.219-1 to determine if the entity is an SBA-certified HUBZone small business concern. Additional small business information may be found in the SBA's Dynamic Small Business Search if the entity completed the SBA supplemental pages during registration.

Government Types

**U.S. Local Government
County**

Financial Information

Accepts Credit Card Payments Yes	Debt Subject To Offset No
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EFT Indicator 0000	CAGE Code 5HHK4
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Electronic Funds Transfer

Account Type Checking	Routing Number *****1278	Lock Box Number (blank)
Financial Institution CADENCE BANK	Account Number *****72694	

Automated Clearing House

Phone (U.S.) 8006367622	Email (blank)	Phone (non-U.S.) (blank)
Fax (blank)		

Remittance Address

**Laura Turner
Cadence Bank
3500 Colonnade PKWY STE 600
Birmingham, Alabama 35243
United States**

EFT Indicator 6430	CAGE Code 9BH47
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Electronic Funds Transfer

Account Type Checking	Routing Number *****6295	Lock Box Number (blank)
Financial Institution CADENCE BANK, N.A.	Account Number *****76430	

Automated Clearing House

Phone (U.S.) 8003290289	Email (blank)	Phone (non-U.S.) (blank)
Fax		

(blank)

Remittance Address

Fort Bend County - EMS Patient Acct Svcs ACH
301 Jackson ST
Richmond, Texas 77469
United States

Taxpayer Information

EIN *****1969	Type of Tax Applicable Federal Tax	Taxpayer Name FORT BEND COUNTY OF
Tax Year (Most Recent Tax Year) 2021	Name/Title of Individual Executing Consent County Judge	TIN Consent Date May 18, 2023
Address 301 Jackson ST Richmond, Texas 77469	Signature KP George	

Points of Contact

Accounts Receivable POC

📧
Bill Rickert
Bill.Rickert@fortbendcountytx.gov
2813413764

Electronic Business

📧
Kyle P George
County.Judge@FortBendCountyTx.gov
2813418608

County Judge
301 Jackson ST
Richmond, Texas 77469
United States

Myounghi Heasty
Myounghi.Heasty@fortbendcountytx.gov
2816337680

Auditor's Office
301 Jackson ST
Richmond, Texas 77469
United States

Government Business

📧
Kyle P George
County.Judge@fortbendcountytx.gov
2813418608

County Judge
301 Jackson ST
Richmond, Texas 77469
United States

Myounghi Heasty
Myounghi.Heasty@fortbendcountytx.gov
2816337680

Auditor's Office
301 Jackson ST
Richmond, Texas 77469
United States

Service Classifications

NAICS Codes

Primary	NAICS Codes	NAICS Title
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Size Metrics

IGT Size Metrics

Annual Revenue (from all IGTs)
(blank)

Worldwide

Annual Receipts (in accordance with 13 CFR 121) (blank)	Number of Employees (in accordance with 13 CFR 121) (blank)
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Location

Annual Receipts (in accordance with 13 CFR 121) (blank)	Number of Employees (in accordance with 13 CFR 121) (blank)
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Industry-Specific

Barrels Capacity
(blank)

Megawatt Hours
(blank)

Total Assets
(blank)

Electronic Data Interchange (EDI) Information

This entity did not enter the EDI information

Disaster Response

This entity does not appear in the disaster response registry.

CERTIFICATION OF NON-DEBARMENT OR SUSPENSION

In accordance with Executive Order 12549 and Executive Order 12689, entitled Debarment and Suspension, and any applicable implementing regulations, this certification must be completed by the Organization:

1. Under penalty of perjury, except as noted below, all persons or firms or any person associated therewith in the capacity of owner, partner, director, officer, or manager:
 - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency.
 - b. Have not, within the three (3) year period preceding this certification, been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction, violation of Federal or state antitrust statutes, or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses listed in subparagraph (1)(b) of this certification; and
 - d. Have not, within the three (3) year period preceding this certification, had one or more public transactions (Federal, state, or local) terminated for cause or default.
 - e. Will not subcontract with parties listed on the General Services Administration's List of Parties Excluded from Federal Procurement or Non-procurement Programs
2. If such persons or firms later become aware of any information contradicting the statements of paragraph (1), they will promptly provide that information to NACCHO.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL 	TITLE County Judge
ORGANIZATION Fort Bend County	DATE SIGNED 9/8/2023

FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT
Data Collection Form

The Federal Funding Accountability and Transparency Act (FFATA) required a system to allow prime grant award and prime contract recipients to report sub-award activity and executive compensation. The FFATA Subaward Reporting System – FSRS.gov – is the system that allows grant award and contract award recipients to electronically report their sub-award activity.

Pursuant to 2 CFR Appendix A to Part 170 - Award Term (as defined in 2 CFR 170.320), and in compliance with the FFATA Subaward Reporting System (FSRS) reporting requirements, National Association of County & City Health Officials (NACCHO) must capture and report sub-award and executive compensation data regarding its first-tier sub-award that obligate **equal or exceed \$30,000** or more in Federal funds.

ORGANIZATION AND PROJECT INFORMATION:

Active SAM Unique Entity ID: **MJG8N8EPN2L3**

Name of Entity: **Fort Bend County**

Address of Entity: **301 Jackson Street**

City: **Richmond**, State: **TX**, Country: **USA**

Zip +4: **77469-31**, Congressional District: **22**

Amount of Award: **\$75,000**

Project Description: **Infectious Disease Outbreaks: Enhancing Forecastin**

Entity's Principal Place of Performance: **5855 Sienna Springs Way**

City: **Missouri City**, State: **TX**, Country: **USA**

Zip +4: **77459-74**, Congressional District: **22**

EXECUTIVE COMPENSATION INFORMATION:

1. In your business or organization's preceding completed fiscal year, did your business or organization (the legal entity with this SAM record, represented by a SAM Unique Entity ID, belongs) receive:

(1) 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements as defined at 2 CFR 170.320; **and**

(2) \$30,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements as defined at 2 CFR 170.320?:

Yes ☒ No ☐

FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT

Data Collection Form

If yes proceed to question 2, if no, stop, and sign the Certification.

2. Does the public have access to information about the compensation of the executives in your business or organization (the legal entity with this SAM record, represented by a DUNS number, belongs) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?:

Yes ☒ No ☐

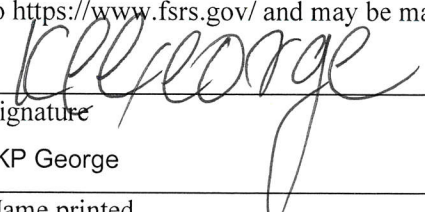
If you answer No, please provide the following information below: Names and total compensation of each of the five (5) most highly compensated executives for Subcontractor's preceding fiscal year. Total compensation includes salary and bonus, awards of stock, stock options and stock appreciation rights, earnings for services under non-equity incentive plans, change in pension value, above-market earnings on deferred compensation which is not tax-qualified, and other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of employee, perquisites or property) for the executive exceeds \$10,000. For more information, please see 17 CFR 229.402(c)(2).

Names and total compensation of the five highest compensated officers of the entity:

No.	Name	Title	Total Compensation for Most Recently Completed Fiscal Year

Certification

I certify, on behalf of the Legal Entity that the information provided in response to this information request is complete and accurate. I further certify that I have the authority to provide the requested information and execute this certification on behalf of the Legal Entity. Last, I certify that I am fully aware that the information provided in response to this Information Request will be submitted to <https://www.fsr.gov/> and may be made public.


Signature

KP George

Name printed

County Judge

Title

9/8/2023

Date



VENDOR INFORMATION FORM

Organization

Official Name of Organization: _____

EIN: _____ DUNS: _____

SAM Unique Entity ID: _____ CAGE Code: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Primary Contact

Name: _____

Title: _____

Organization: _____

Address (if different from above): _____

Telephone: _____ Fax: _____

Email Address: _____

Person to Receive Contract from NACCHO for Signature

Name: _____

Email Address: _____

Authorized Signer for Contract

Title: _____

Organization: _____

Address (if different from above): _____

Telephone: _____

Email Address: _____

Accounts Payable Information

Name (Attn): _____

Address (if different from above): _____

Telephone: _____

Email Address: _____

Request for Taxpayer Identification Number and Certification

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

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

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Fort Bend County

2 Business name/disregarded entity name, if different from above
Fort Bend County

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☒ Other (see instructions) ► **Political subdivision of the State of Texas**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) **X**

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
301 Jackson St. Suite 201

6 City, state, and ZIP code
Richmond, TX 77469

7 List account number(s) here (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. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

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or

Employer identification number

7	4	-	6	0	0	1	9	6	9
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Part II 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. See the instructions for Part II, later.

Sign Here Signature of U.S. person ► *James Kover* Date ► **1/3/2023**

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.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

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).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ⁴
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.