

NEW HORIZONS SUPPLY COOPERATIVE--PATRON CONSENT AND SUBSTITUTE IRS FORM W-9

I hereby consent to include my gross income, as now or hereafter provided in the federal income tax laws, the stated dollar amount of each written notice of allocation which I receive from NEW HORIZONS SUPPLY COOPERATIVE, FENNIMORE, WI with respect to patronage during the content and all subsequent taxable years of this cooperative. This consent shall be revocable by me at anytime if in writing.

NAME ON SOCIAL SECURITY CARD OR LEGAL NAME >>

Check appropriate box: Individual or sole proprietor Partnership, LLC, Corporation Other Entity

ADDRESS

BIRTHDATE

CITY, STATE, ZIPCODE

PHONE #

TAXPAYER IDENTIFICATION NUMBER

Individuals & sole proprietors, enter your SOCIAL SECURITY NUMBER>>>

All others, enter your FEDERAL EMPLOYER IDENTIFICATION NUMBER>>>

CERTIFICATION

Under penalties of perjury, I certify that:

- 1) The number shown on this form is my correct taxpayer identification number.
- 2) I am not subject to back up withholding, due to failure to report interest and dividend income.
- 3) I am a U.S. citizen or U.S. person as defined in the IRS Form W-9 instructions.
- 4) The FATCA code is indicating that the payee is exempt from FATCA reporting is correct.

NH A/C # >>

FATCA>>

CERTIFICATE INSTRUCTIONS

You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding

" The Internal Revenue Service does not require your consent to any provision of this document other than the certificate required to avoid back up withholding."

Signature _____ **Title** _____ **Date** _____