



# INDEPENDENT CONTRACTOR INFORMATION FORM (W-9 Reference)

**FOR TAX PURPOSES — COMPLETE ALL FIELDS AND RETURN TO 7 GRANDS LOGISTICS LLC**

This form collects IRS information for Form 1099-NEC. Also attach your official IRS W-9 from [irs.gov/forms-pubs/about-form-w-9](https://irs.gov/forms-pubs/about-form-w-9)

## PART 1 — TAXPAYER IDENTIFICATION

|                                    |   |
|------------------------------------|---|
| Legal Name (as on tax return)      |   |
| Business Name / DBA (if different) |   |
| Federal Tax Classification         | <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Other: |
| Exempt Payee Code                  |   |
| FATCA Exemption Code               |   |

## PART 2 — TAXPAYER IDENTIFICATION NUMBER

|                              |                  |
|------------------------------|------------------|
| Social Security Number (SSN) | ___ - ___ - ____ |
| — OR — Employer ID (EIN)     | __ - ____ - ____ |

Enter ONE: SSN for individuals/sole proprietors, EIN for businesses.

## PART 3 — ADDRESS

|                |  |
|----------------|--|
| Street Address |  |
| City           |  |
| State          |  |
| ZIP Code       |  |

## PART 4 — CERTIFICATION

1. The number shown is my correct taxpayer identification number.
2. I am not subject to backup withholding (or I am exempt).
3. I am a U.S. citizen or other U.S. person.
4. The FATCA code(s) entered (if any) are correct.

### SIGNATURE UNDER PENALTIES OF PERJURY

|           |              |       |
|-----------|--------------|-------|
| _____     | _____        | _____ |
| Signature | Printed Name | Date  |

**Return completed form to:** 7 Grands Logistics LLC | Kansas City, MO | 7grandslogistics@gmail.com | 816-522-0179