

 Dana Uhlhorn
 775-200-8618
 danamuhlhorn@yahoo.com

01-3

Submitted On: May 28, 2021

Applicant Information

Coordinator Name:

Dana Uhlhorn

Coordinator Title:

President

Coordinator Telephone:

775-200-8618

Coordinator Email

danamuhlhorn@yahoo.com

Organization/Company Information

Name:

Fernley ACES

Mailing Address

40 N. Center St

City

Fernley

State

NV

Zip

89408

Year Started:

2018

x ID#

xx-xxx8812

Organization Status (Select One)

Non-Profit*

***Attach copy of 501(c) or Federal Non-Profit Certificate**

256

Project/Event Information

Project/Event Name

Mutant Vehicle Parade/Haunted House/Christmas Village

Project/Event Location

Main St/TBD/Main St. Art Park

Date of Event

09/04/2021

Date Work Will Begin:

09/04/2021

Date Work Will Conclude

01/15/2022

Provide an overview of the project/event including purpose, objectives, short and long term goals:

The Mutant Vehicle Parade will be held Sept 4th, and will be a parade of vehicles such as you might see at Burning Man, or other various art cars. Afterwards the cars will park at the Out of Town Park and there will be an art show with various vendors. This will be the inaugural year for this event, this will grow to be a very big deal I think. This year should be a good turnout because Burning Man is not being held again this year, and all those people are looking for an outlet for their creativity.

The Haunted House will be held October 29th through October 31st. we are still trying to determine a place to hold this. We have had this event once before and it was a smashing success. We had over 1000 people got through our Haunted House known as Chaos Corner. The reviews were fantastic with people telling us it was scarier than the Haunted Houses in Reno, there were a couple of girls that actually peed their pants a little they got so scared! We are looking forward to out doing ourselves this year!

The Christmas Village is an annual event that the Fernley ACES was instrumental in starting, and has grown each year that it has been held. We hope to see it get even bigger this year.

Has this project/event been previously held before?

Yes

Has this project/event been previously funded by the Fernley Convention & Tourism Authority Board?

Yes

Please list date of prior award

12/31/2019

Please list prior award amount:

7000

How many vendors attended to previous event:

1000

Total Project/Event Budget

Total Budget Amount

17820

Expenses: Itemize all expenses including items on which grant monies will be expended.

Mutant Vehicle Parade:		Biggest Little Radio Live Remote	\$800.00
Park fee	\$50.00	Biggest Little Radio Event ads	\$1000.00
Insurance	\$300.00	Cumulus Radio Group ads	\$2500.00
Parade Route	\$120.00	Social Media ads	\$500.00
Miscellaneous	\$50.00	Flyers and pamphlets	\$500.00
Haunted House:		Biggest Little Radio Live Remote	\$800.00
Venue Rental	\$2000.00	Biggest Little Radio ads	\$750.00
Creation Materials	\$2000.00	Social Media ads	\$500.00
Insurance	\$500.00	Cumulus Radio Group	\$2000.00
Flyers and Pamphlets	\$500.00	Miscellaneous	\$50.00
Christmas Village:		Biggest Little Radio ads	\$750.00
Park Fee	\$50.00	Cumulus Radio Group ads	\$2000.00
Power bill to city	\$150.00		

Total Expenses

17820

Revenue: Itemize all revenues including requested grant monies from FCTA and other entities, donations, corporate sponsorships, entry fees, spectator fees, etc.

Requesting from FCTA Grant	\$10,000.00
Funds on hand	\$3000.00
Ticket sales for Haunted House	\$10,000.00
Board Project Sales	\$500.00
Vendor space at Mutant Parade	\$5000.00
Additional Donations	\$500.00

Total Revenues

29000

Grant Request

Amount Requesting \$

10000

1:1 Matching Funds is Required for For-Profit Organizations.

Amount of Matching Funds \$

--

Will you accept less than requested?

Yes

Explain how receiving grant funding will impact the project/event:

FCTA Grant funds will be used primarily for funding of our advertising. Not only for these particular events, but we will produce a few different trifold flyers that promote what the Fernley ACES (Art and Culture Event Squad) does, but also promoting the great opportunity to participate in most of the events we hold. Fernley ACES is trying to grow the art culture here in Fernley, we will take these flyers to other events and venues, getting vendor space in those events, to spread the word.

Fernley Convention and Tourism Authority Board on average receives requests for twice the amount of grant funding available.

Explain why your project/event should be selected to receive grant funding:

I am not sure what other events, or projects we are competing against, so it would be hard to say that our events will be a bigger draw. That said, I do think the events we have planned, not only have the ability to draw people to the area this year, but with consistency, they will grow to be huge events that will cement Fernley firmly in people's travel plans. The added benefit to the pride in our city to each and every individual living here cannot be measured. But I think that it makes every resident of Fernley proud to be able to say "We have a great Christmas Village, you should come and see it", or "The Mutant Vehicle Parade in town is so crazy, you really can't miss it! Did you see it on the news last year?", even, "Oh man, did you check out the Haunted House this year? Last year I was so scared I peed my pants! Can't wait to go again".

Are you requesting project/event sponsorship?

.0

If you are requesting project/event sponsorship, explain in detail how grant funds will be utilized in accordance with the FCTA grant guidelines in section 6 & 7:

--

Will requested funds be used for advertising?

Yes

If Yes, please designate what you will be advertising:

Resources in Fernley

--

Accommodations in Fernley

--

Special Event(s) in Fernley

true

Other

true

If other, please specify:

Art and Culture Events available to participate in in Fernley

Grant Request - Advertising Categories

Categories	Amount Requesting
Brochure	750
Total Amount Budgeted	If other, please explain
1000	--

Explain in detail how grant disbursement will be used for advertising or other:

This will be used to fund tri-fold flyers showing what the Fernley ACES is and does.

Categories	Amount Requesting
Radio	8500
Total Amount Budgeted	If other, please explain
10000	--

Explain in detail how grant disbursement will be used for advertising or other:

This funding will be for radio ads not only on the local station, which will also be doing live remotes at a couple of the events, but we will also be advertising on the biggest radio stations in Reno. The Reno stations have sister stations in Sacramento, and the ads will play on there as well.

Categories	Amount Requesting
Social Media	750
Total Amount Budgeted	If other, please explain
1000	--

Explain in detail how grant disbursement will be used for advertising or other:

This will be for ads run on various Facebook pages, including the Burning Man pages, these are viewed all over to world.

Economic Impact

Local is defined as being within a 60-mile radius of Fernley

Estimated number of visitors

7000

What percentage of visitors are: Local

--

What percentage of visitors are: In State

75

What percentage of visitors are: Out of State

25

Estimated number of participants:

200

What percentage of participants are: Local

80

What percentage of participants are: In State

5

What percentage of participants are: Out of State

15

Explain in detail how attendance/participation will be measured:

Attendance at the Mutant Vehicle Parade will have to be a guesstimate as there is no charge to watch. Est. 5000

Attendance at the Haunted House will be ticketed, and therefore easy to keep track of. Est. 1,000

Attendance for viewing the Christmas Village could easily count everyone that drives down Main St., but a true estimate of the number of people that come to specifically view the houses, is around 1000

Estimate number nights spent in Fernley because of this project/event:

2

Estimate the number of previous visitors/participants for same or similar project/event

5000

What percentage of previous visitors/participants were: Local

90

What percentage of previous visitors/participants were: In State

5

Describe method(s) used to measure previous attendance:

The only previous event that I can think of that is close to what the Mutant Vehicle Parade will be is the 4th of July parade and events. I think a reasonable estimate of the attendance for that is 5000 people. We had over 1000 people at our previous Haunted House. And the Christmas Village was seen by a large number of People, but a guess of 1000 people stopping and getting out to look closer, is just a guess.

Projected increase of # of visitors (if any) to Fernley because of project/event in comparison with previous years:

5000

Estimate and describe the overall economic impact to Fernley because of this project/event:

The Mutant Vehicle Parade will be fun and entertaining for locals, and visitors alike. It could grow to be the type of draw that Burning Man itself has become. Burning Man pulls people from around the globe, and I can see this doing the same. I envision the parade being the centerpiece of a whole week of a celebration of the arts. Something along the lines of ARTTOWN in Reno, where the whole city ends up getting involved. If we can grow it to this point, this would be the biggest financial impact to Fernley since Victory Logistics!

The Haunted House that we put on last time, Chaos Corner, drew people from Reno because of the advertising we did, and the word of mouth reports of how creative and scary it was. There were people that were already visiting the area from out of state that heard about it too, and came to check it out. We will be working hard to improve on that reputation, so that people will make it a point to come to our Haunted House. This year if we can find the right facility we are going to try to have a two sided house for two different experiences.

The Christmas Village is something we do primarily for locals, although as it continues to grow it may draw people from outside the local area. Ogden, Utah for instance has a Christmas Village that draws quite a crowd.

Does the actual project/event create media exposure for Fernley:

Yes

If the actual project/event creates media exposure for Fernley, what percentages are local

70

If the actual project/event creates media exposure for Fernley, what percentages are In State

10

If the actual project/event creates media exposure for Fernley, what percentages are Out of State

20

Estimated number of people that will be exposed to the promotion of this project/event:

100000

Estimated percentage of people exposed to the promotion of this project/event that are local

50000

Estimated percentage of people exposed to the promotion of this project/event that are In State

50000

Estimated percentage of people exposed to the promotion of this project/event that are Out of State

50000

Describe the type of anticipated media exposure:

With the amount of advertising we will be doing, and the fact that this will be a unique and interesting event, I anticipate the local TV news stations coming out to film at least part of the event. We will also have a local drone pilot filming to produce a video that we will run on our website, and push out through social media. This video will most likely go viral.

Describe how the project/event improves tourism/local economy by both people living in Fernley and people traveling to Fernley:

The Mutant Vehicle Parade will be fun and entertaining for locals, and visitors alike. It could grow to be the type of draw that Burning Man itself has become. Burning Man pulls people from around the globe, and I can see this doing the same. I envision the parade being the centerpiece of a whole week of a celebration of the arts. Something along the lines of ARTTOWN in Reno, where the

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Attestation

I hereby declare that the information provided is accurate to the best of my knowledge and agree to the terms above:

true

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **APR 09 2019**

FERNLEY ACES
40 N CENTER ST
FERNLEY, NV 89408-0000

Employer Identification Number:
83-3848812
DLN:
26053467003019
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
May 1, 2018
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov



040604

**Nonprofit
 Articles of Incorporation**
 (PURSUANT TO NRS CHAPTER 82)

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number 20190178015-34 Filing Date and Time 04/23/2019 2:26 PM Entity Number E0203802019-6
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USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:	Fernley ACES
2. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent: Name _____ <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input checked="" type="checkbox"/> Office or Position with Entity (name and address below) Dana Uhlhorn - President Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity 2090 Farm District Rd Fernley Nevada 89408 Street Address City State Zip Code Mailing Address (if different from street address) Nevada City Zip Code
3. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than four directors/trustees)	1) Dana Uhlhorn - President Name 2090 Farm District Rd Fernley NV 89408 Street Address City State Zip Code 2) Joseph Maino - Treasurer Name 433 Trellis Fernley NV 89408 Street Address City State Zip Code 3) Name _____ Street Address _____ City _____ State _____ Zip Code _____ 4) Name _____ Street Address _____ City _____ State _____ Zip Code _____
4. Purpose: (required; continue on additional page if necessary)	<i>The purpose of the corporation shall be:</i> Initiating, encouraging, and promoting art, and cultural events in Fernley and surrounding areas
5. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.390, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. Dana Uhlhorn _____ Name Incorporator Signature 2090 Farm District Rd Fernley NV 89408 Address City State Zip Code
6. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. If the registered agent is unable to sign the Articles of Incorporation, submit a separate signed Registered Agent Acceptance form. <input checked="" type="checkbox"/> _____ Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date 03/08/2019

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 82 Articles
 Revised: 9-26-17

SECRETARY OF STATE



CORPORATE CHARTER

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that **FERNLEY ACES**, did on April 23, 2019, file in this office the original Articles of Incorporation; that said Articles of Incorporation is now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 2, 2019.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Melanie Negralle
Certificate Number: C20190424-1428

(NONPROFIT) INITIAL/ANNUAL LIST OF OFFICERS AND DIRECTORS OF:

ENTITY NUMBER

Fernley ACES
NAME OF CORPORATION

FOR THE FILING PERIOD OF 03/08/2019 TO 3/01/2020



USE BLACK INK ONLY - DO NOT HIGHLIGHT

Filed in the office of <i>Barbara K. Cegavske</i>	Document Number 20190178019-78
Barbara K. Cegavske Secretary of State State of Nevada	Filing Date and Time 04/23/2019 2:26 PM
	Entity Number E0203802019-6

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. If there are additional officers, attach a list of them to this form. An Officer or other authorized signer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- Return the completed form with the \$50.00 filing fee, if no capitalization. A \$50.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- Make your check payable to the Secretary of State. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

ABOVE SPACE IS FOR OFFICE USE ONLY

FILING FEE: \$50.00 (IF NO CAPITALIZATION) LATE PENALTY: \$50.00 (IF FILING LATE)

Charitable Solicitation Information - check applicable box

Does Organization intend to solicit charitable/tax deductible contributions? No - no additional form required Yes - "Charitable Solicitation Registration Statement" required

Organization claims exemption pursuant to (2015) AB50 15(1) or is recognized as a church under Internal Revenue Code 501(c)(3). Exempt from filing - "Exemption From Charitable Solicitation Registration Statement" required

** Failure to include the required statement form will result in rejection of the filing and could result in late fees.**

For nonprofit entities formed under NRS Chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is \$200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below and submit Declaration of Eligibility form. Failure to attach the required notarized Declaration of Eligibility will result in a rejection, which could result in late fees.

Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee. Exemption code 002

NRS Chapter 81 - Nonprofit: entities which are Unit-owners' association or Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls into one of these categories by marking the appropriate box. If the entity does not meet either of these categories please submit \$200.00 for the state business license.

Unit-owners' Association Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. § 501(c)

NAME	TITLE(S)	CITY	STATE	ZIP CODE
Dana Uhlhorn	PRESIDENT (OR EQUIVALENT OF)	Fernley	NV	89408
ADDRESS				
2090 Farm District Rd				
NAME	TITLE(S)	CITY	STATE	ZIP CODE
	SECRETARY (OR EQUIVALENT OF)			
ADDRESS				
NAME	TITLE(S)	CITY	STATE	ZIP CODE
Joseph Maino	TREASURER (OR EQUIVALENT OF)	Fernley	NV	89408
ADDRESS				
433 Trellis				
NAME	TITLE(S)	CITY	STATE	ZIP CODE
	DIRECTOR			
ADDRESS				

None of the officers or directors identified in this list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Signature of Officer or Other Authorized Signature

Title: President Date: 03/08/2019

Nevada Secretary of State List Nonprofit Revised: 11-7-17



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 884-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov



280103

Charitable Solicitation Registration Statement

(PURSUANT TO NRS CHAPTER 82)

Required for any corporation that intends to solicit charitable/tax deductible contributions. To be filed with Initial/Annual List Forms.

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number 20190178018-67
	Filing Date and Time 04/23/2019 2:26 PM
	Entity Number E0203802019-6

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Names of Charitable Organization: (please complete items a thru c; attach additional page(s) if necessary)	a) Name of charitable organization as filed with the Secretary of State's office: Fernley ACES
	b) Exact name of charitable organization as registered with the Internal Revenue Service: Fernley ACES
	c) Name or names under which charitable organization may or intends to solicit charitable contributions: Fernley ACES
2. Web Address: (optional)	*will be listed on public entity search
3. USA PATRIOT ACT certification: (optional)	<input checked="" type="checkbox"/> Check here to accept the following certification. In compliance with the Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism (USA PATRIOT) Act of 2001 and other counterterrorism laws, I hereby certify on behalf of the herein named entity that all funds and donations will be used in compliance with all United States of America anti-terrorism financing and asset control laws, statutes and executive orders.
4. Places of Business: (please complete items a and b; attach additional page(s) if necessary)	a) Address and telephone number of the principal place of business of the charitable organization: 40 N. Center St. Fernley NV 89408 USA Address City State Zip Code Country Telephone Number: 775 200-8618
	b) Address and telephone number of any office in this state OR if none, name, address and telephone number of custodian of its financial records: 433 Trellis Drive Fernley NV 89408 USA Address City State Zip Code Country Telephone Number: 913 481-1432 Name of Custodian: Joseph Maino
5. Exempt Status and Federal Tax ID:	Federal tax exempt status: 501 c 3 applied for EIN - Federal Tax ID: 83-3848812
6. Names and Addresses of Executive Personnel: (attach additional page(s) if necessary)	Name: Dana Uhlhorn Title: President Address: 2090 Farm District Rd. Fernley NV 89408 USA City State Zip Code Country
7. Fiscal Year:	Day and month of end of fiscal year of the charitable organization: Day: 31 Month: March
8. Financial Information from IRS Form 990, 990EZ or if no Form 990, a good faith estimate for most recent fiscal year:	<input checked="" type="checkbox"/> Check here if you file Form 990N or have not filed a Form 990 or 990EZ. If checked, please provide a good faith estimate for its current fiscal year. All others please provide the information from Form 990 or 990EZ for the most recent fiscal year.
	Total Revenue (line 12, Form 990; line 9, Form 990EZ)..... est. 26,500
	Total Expenses (line 16, Form 990; line 17, Form 990EZ)..... est. 17,000
	Revenue less Expenses (line 18, Form 990; line 18, Form 990EZ)..... est. 9,500
	Total Assets (line 20, Form 990; line 25, Form 990EZ)..... est. 9,750
	Total Liabilities (line 21, Form 990; line 26, Form 990EZ)..... est. 5,000
Net Assets or Fund Balances (line 22, Form 990; line 27, Form 990EZ) at end of fiscal yr. est. 4,750	
9. Signature: (must be signed by an officer of the nonprofit corporation)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.336, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. X <i>[Signature]</i> Title: President Date: 4/17/19 Officer Signature Title Date

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.

Print or type. See Specific instructions on page 3.

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

2 Business name/disregarded entity name, if different from above

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) ► _____

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

Exempt payee code (if any) _____

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.
40 N. Center St.

6 City, state, and ZIP code
Fernley, NV. 89408

7 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. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			-				
--	--	--	---	--	--	--	--

or

Employer identification number


8	3	-	3	8	4	8	8	1	2
---	---	---	---	---	---	---	---	---	---

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 this certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ►  Date ► **11/1/19**

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.