YEAR
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CALIFORNIA	<b>FORM</b>

**20** 23

Withholding Exemption Certificate

(This form can only be used to certify exemption from nonresident withholding under California R&TC Section 18662 This form cannot be used for exemption from ware withholding.)

590

File	e this form with your withholding agent.	not be useu	Withholding agent's r		.)			
	ease type or print)							
Vendor/Payee's name Solution Tree Inc		Vendor/Payee's         □ Social security number           □ S0S no.         □ California corp. no.         ☑ FEIN           35-2026417		Note: Failure to furnish your identification number will make this certificate void.				
	Vendor/Payee's address (number and street) 555 N Morton St		APT no.	Private Mailbox no.	Vendor/Pay	yee's daytime telephone no.		
City		State	ZIP Code		( )			
Bloomington IN			47404					
wit	ertify that for the reasons checked below, the entity hholding requirement on payment(s) made to the evendor/payee:							
	Individuals — Certification of Residency: I am a resident of California and I reside at inform the withholding agent. See instruction							
<b>∠</b>	Corporations:  The above-named corporation has a permanent place of business in California at the address shown above or is qualified through the California Secretary of State to do business in California. The corporation will withhold on payments of California source income to nonresidents when required. If this corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California, I will promptly inform the withholding agent. See instructions for Form 590, General Information E, for the definition of permanent place of business.							
	Partnerships:  The above-named partnership has a permanent place of business in California at the address shown above or is registered with the California Secretary of State, and is subject to the laws of California. The partnership will file a California tax return and will withhold on foreign and domestic nonresident partners when required. If the partnership ceases to do any of the above, I will promptly inform the withholding agent. Note: For withholding purposes, a Limited Liability Partnership is treated like any other partnership.							
	Limited Liability Companies (LLC):  The above-named LLC has a permanent place of business in California at the address shown above or is registered with the California Secretary of State, and is subject to the laws of California. The LLC will file a California tax return and will withhold on foreign and domestic nonresident members when required. If the LLC ceases to do any of the above, I will promptly inform the withholding agent.							
	Tax-Exempt Entities:  The above-named entity is exempt from tax under California or federal law. The tax-exempt entity will withhold on payments of California source income to nonresidents when required. If this entity ceases to be exempt from tax, I will promptly inform the withholding agent.							
	Insurance Companies, IRAs, or Qualified Pen The above-named entity is an insurance con			alified pension or p	orofit-shari	ing plan.		
	California Irrevocable Trusts:  At least one trustee of the above-named irrevocable trust is a California resident. The trust will file a California fiduciary tax return and will withhold on foreign and domestic nonresident beneficiaries when required. If the trustee becomes a nonresident at any time, I will promptly inform the withholding agent.							
	Estates — Certification of Residency of Deceased Person:  I am the executor of the above-named person's estate. The decedent was a California resident at the time of death. The estate will file a California fiduciary tax return and will withhold on foreign and domestic nonresident beneficiaries when required.							
CE	RTIFICATE: Please complete and sign below.							
	der penalties of perjury, I hereby certify that the in nditions change, I will promptly inform the withholo		rovided herein is,	to the best of my	knowledge	e, true and correct. If		
Ver	ndor/Payee's name and title (type or print) Tony	Toohill, CF	· O					
Vei	ndor/Payee's signature	I, 6=	ð		Date	1/10/23		
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