

# JERRY W. EICHELBERGER

320 Gladeview Place - Brandon, MS 39047-5015 - Cell: (601) 668-6614

E-Mail: [G4PilotMS@gmail.com](mailto:G4PilotMS@gmail.com)

## Pilot Certificates and Ratings, & other Information

Former FAA Designated Pilot Examiner (SW31)  
T.S.A. 12-5 background security & fingerprint checks  
FAA Airline Transport Pilot License - Unrestricted A/MEL  
Commercial Airplane Single Engine Sea Rated  
FAA First Class Medical (**Issued:** 08/28/2023)  
Last Instrument Proficiency Check - **05/12/2023** (FSI Dallas Gulfstream GIV)  
Gulfstream G-IV 91 PIC Recurrent (Expires 05/2024)  
Citation Sovereign/Latitude PIC Recurrent (Expires 10/2023)  
Cessna Citation 525S PIC Single Pilot Authorization (Expires 10/24)  
Cessna 500/550/560 Series PIC  
King Air 300/350/200/90 PIC Type Rated, Single Pilot - (Expires: 12/23)  
Second in Command Type Ratings in Citation 750 (X), Citation XL/XLS (CE-560XL) and  
Citation III/VII (CE-650), Hawker-125.  
Glass Cockpit/TAA/EFIS & FMS Experience - Honeywell Epic, Primus 1000/2000, GNS-XLS,  
Universal UNS-1K, Garmin G500/3000/G1000(NXI)/750/650, Proline-21  
Certified Flight Instructor - Airplane Single & Multi-Engine, Instrument (**Expires: 03/2025**)  
Current United States Passport (**Expires 02/15/2030**)  
International/Canada/Caribbean/Mexico/Nicaragua/South American experience  
No history of violations, suspensions, restrictions, incidents or accidents  
Civil Air Patrol, Director of Standards/Evaluation (DOV), LTC, Mississippi Wing

## FLIGHT EXPERIENCE

Total Time:	8,414	Multi-Engine:	5,374
Pilot in Command:	6,379	Second in Command:	1,859
HP/Complex:	6,333	Night:	938
Actual Instrument:	1,173	Simulated Instrument:	221
Simulator/FTD:	209	Cross Country:	6,660
Turbine	4,668	As Flight Instructor:	1,588
Day Landings	7,389	Night Landings:	1,128
Single Engine	2,933		

**AIRCRAFT FLOWN:** GULFSTREAM G-IVSP, CITATION 750 (X), CITATION SOVEREIGN (680/+), CITATION LATITUDE (680A), CITATION VII (650), CITATION 560XLS, CITATION S/II (550), CITATION 560/V/ULTRA/ENCORE, CITATION 550 BRAVO, CITATION ISP, CITATION 500/501, CJ1+/2/3+/4/M2, FALCON 10/100, HAWKER 125-700A, KING AIR 90/200/300/350, CESSNA 337, BEECH 95, BEECH BARON 55/58, CESSNA 414A/421, CESSNA 340, PIPER SENECA II/V, BEECH BONANZA V35/A36, BEECH C-33 DEBONAIRE, CESSNA 150/152/172/182/206/210, PIPER CHEROKEE 140/160/180, PIPER 6X, PIPER CHEYENNE (1A)

## PERSONAL INFORMATION

MARRIED, NON-SMOKER, NON-DRINKER. REFERENCES ON REQUEST

# UNITED STATES OF AMERICA

XI



DEPARTMENT OF TRANSPORTATION • FEDERAL AVIATION ADMINISTRATION

IV NAME

JERRY WAYNE EICHELBERGER

V ADDRESS 320 GLADEVIEW PL  
BRANDON MS 39047-5015

VI NATIONALITY USA

IVa D.O.B. 21 DEC 1964

SEX HEIGHT WEIGHT HAIR EYES

M 71 250 BROWN BLUE

IX HAS BEEN FOUND PROPERLY QUALIFIED TO EXERCISE THE PRIVILEGES OF

II AIRLINE TRANSPORT PILOT

III CERTIFICATE NUMBER **2788207**

X DATE OF ISSUE 21 OCT 2022

XIV

A handwritten signature in black ink, appearing to read "Billy Nolen".

VIII

ACTING ADMINISTRATOR



JERRY WAYNE EICHELBERGER

2788207

XII RATINGS

AIRLINE TRANSPORT PILOT

AIRPLANE MULTIENGINE LAND

BE-300; CE-500; CE-525S; CE-560XL; CE-650; CE-680; CE-750; G-IV;

HS-125

COMMERCIAL PRIVILEGES

AIRPLANE SINGLE ENGINE LAND & SEA

XIII LIMITATIONS

ENGLISH PROFICIENT.

CE-560XL CE-650 CE-750 HS-125 SIC PRIVILEGES ONLY.

VII SIGNATURE  
OF HOLDER



# UNITED STATES OF AMERICA

XI

DEPARTMENT OF TRANSPORTATION • FEDERAL AVIATION ADMINISTRATION

IV NAME

**JERRY WAYNE EICHELBERGER**

V ADDRESS 320 GLADEVIEW PL  
BRANDON MS 39047-5015

VI NATIONALITY USA

SEX HEIGHT WEIGHT HAIR EYES

IVa D.O.B. 21 DEC 1964

M 71 250 BROWN BLUE

IX HAS BEEN FOUND PROPERLY QUALIFIED TO EXERCISE THE PRIVILEGES OF

II FLIGHT INSTRUCTOR

III CERTIFICATE NUMBER **2788207CFI**

X DATE OF ISSUE 6 JAN 2023

XIV



VIII ACTING ADMINISTRATOR



JERRY WAYNE EICHELBERGER

2788207CFI

XII RATINGS

FLIGHT INSTRUCTOR

AIRPLANE SINGLE AND MULTIENGINE; INSTRUMENT AIRPLANE

XIII LIMITATIONS

VALID ONLY WHEN ACCOMPANIED BY PILOT CERTIFICATE NO. 2788207. EXPIRES:  
31 MAR 2023.

VII SIGNATURE  
OF HOLDER



*Jerry W. Eichelberger*

I UNITED STATES OF AMERICA

XI

DEPARTMENT OF TRANSPORTATION • FEDERAL AVIATION ADMINISTRATION

IV NAME

JERRY WAYNE EICHELBERGER

V ADDRESS 320 GLADEVIEW PL  
BRANDON MS 39047-5015

VI NATIONALITY USA

IVa D.O.B. 21 DEC 1964

SEX HEIGHT WEIGHT HAIR

M 71 240 BROWN

EYES  
BLUE

IX HAS BEEN FOUND PROPERLY QUALIFIED TO EXERCISE THE PRIVILEGES OF

II GROUND INSTRUCTOR

III CERTIFICATE NUMBER 2788207

X DATE OF ISSUE 6 FEB 2022

XIV



VIII ADMINISTRATOR



JERRY WAYNE EICHELBERGER

2788207

GROUND INSTRUCTOR  
ADVANCED

XII RATINGS

XIII LIMITATIONS

VII SIGNATURE  
OF HOLDER



Jerry W. Eichelberger

9216 08/21

### MEDICAL CERTIFICATE FIRST CLASS

This certifies that (*Full name and address*):

JERRY Wayne EICHELBERGER  
320 GLADEVIEW PLACE  
BRANDON MS 39047 USA

Date of Birth	Height	Weight	Hair	Eyes	Sex
12/21/1964	71	267	GRAY	BLUE	M

has met the medical standards prescribed in part 67, Federal Aviation Regulations, for this class of Medical Certificate.

Limitations

Not valid for any class after 2/29/2024. Must use corrective lens(es) to meet vision standards at all required distances.

Date of Examination 08/28/2023	Examiner's Designation No. 000019103
-----------------------------------	---

Examiner

Signature

Typed Name

TERRY FRENCH, DO

AIRMAN'S SIGNATURE

Applicant ID: 1996362765

Control No.: 200010677075

Fold Here

### CONDITIONS OF ISSUE

The holder of this certificate must:

- Have it in his or her personal possession at all times while exercising privileges of an airman certificate. (14CFR § 61.3)
- Understand that the issuance of a medical certificate by an Aviation Medical Examiner may be reversed by the FAA within 60 days. (14CFR § 67.407)
- Comply with validity standards specified for first-, second-, and third-class medical certificates. (14CFR § 61.23)
- Comply with any statement of functional, operational, and/or time limitation issued as a condition of certification. (14CFR § 67.401)
- Comply with the standards relating to prohibitions on operation during medical deficiency. (14CFR §§ 61.53, 63.19, and 65.49)

For International Operations Only: Some holders may be affected by certain international medical standards. Consult the U.S. Aeronautical Information Publication for U.S. differences with ICAO Annex 1 medical standards.





# MISSISSIPPI

# DRIVER LICENSE

*Sean Lindell*

COMMISSIONER

4d LIC NO

**801916529**

15 EXP

**12/21/2025**

3 DOB **12/21/1964**



1 EICHELBERGER  
2 JERRY WAYNE  
8 320 GLADEVIEW PL  
BRANDON, MS 39047-5015

4a ISS **02/06/2022**

9 CLASS **R** 9a END **L**

12 REST **NONE**

15 SEX **M** 16 HGT **5-11"**

18 EYES **BLU**

5 DD **62220-100** 5a SKIN **52FL**



*hll*

dsb.dps.ms.gov  
12/21/1964

0510124522021964



**Class: R-Regular Operator's License**  
**End: L-Motorcycles**

**Rest: None**

# FlightSafety LOGBOOK ENDORSEMENT STICKER

Name: JERRY W. EICHELBERGER

Holder of Airman Certificate No. 2388207

Employed by: EICHELBERGER AVIATION

has successfully completed:

		Yes	N/A
• NVG Initial Training	FAR 61.31(k)(1)&(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• NVG Operating Experience	FAR 61.57(f)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• NVG Proficiency Check	FAR 61.57(g)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• SIC Qualification	FAR 61.55(b)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• SIC Type Rating	FAR 61.55(d)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
61.55(j) One T/O and Ldg. must be accomplished prior to duty as SIC.			
• Flight Review	FAR 61.56(c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• PIC Landing Currency (General)	FAR 61.57(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• PIC Night Landing Currency	FAR 61.57(b)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• PIC Instrument Currency	FAR 61.57(c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Instrument Proficiency Check	FAR 61.57(d)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Alternate Night Landings	FAR 61.57(e)(4)(ii)(D)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
• Pilot in Command Proficiency Check	FAR 61.58	<input checked="" type="checkbox"/>	<input type="checkbox"/>
• Training on Required Areas of Operation	FAR 61.157(b)(2),(e)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Sim. or Aircraft Registration # and Airframe Type: 0820 GIV

Instructor/TCE Name: JTW Location: 172a DFW

TCE#: 4944813 TCE Exp Date: 03/31/24

Instructor/TCE Signature: [Signature] Date: 02/12/23

# COMPLETION CERTIFICATE



This is to certify that

# Jerry Wayne Eichelberger

has completed a CitationJet 525BS Recurrent PIC with Non-FAA CJ-4 Differences course.

A handwritten signature in blue ink, appearing to read "Ken Cook", written over a horizontal line.

Ken Cook  
Training Center Manager

October 4, 2023

Date of Completion



# Certificate of Completion



*This certifies that JERRY WAYNE EICHELBERGER has successfully  
completed BEEHCRAFT KING AIR BE-300/350  
SIMULATOR/GROUND SCHOOL TRAINING ON 12-9-2022.*

A handwritten signature in blue ink, appearing to read "D. S. Carmody", is written over a white rectangular background.

Douglas Carmody 3210167 CFII  
Expires 3/31/2023



# PILOT TRAINING RECORD



843-521-9412

SafePilot.com

NAME OF AIRMAN: <u>Jerry W. Eichelberger</u>		LOCATION OF TRAINING: <u>Beaufort</u>	DATE: <u>12/9/2022</u>
Address: <u>320 Hadview Place</u> City: <u>Brandon</u> State: <u>MS</u> Zip: <u>38407</u>		TYPE OF AIRPLANE (Make/Model): _____	
Email: _____ Phone: ( ) _____		TYPE OF TRAINING: <input type="checkbox"/> TYPE RATING <input type="checkbox"/> SPW <input checked="" type="checkbox"/> INITIAL <input checked="" type="checkbox"/> RECURRENT <input type="checkbox"/> DIFFERENCES	
PILOT CERTIFICATION INFORMATION: <input type="checkbox"/> PVT <input type="checkbox"/> COM <input checked="" type="checkbox"/> ATP	Certificate Number: <u>2788207</u>	MEDICAL INFORMATION: Date of Birth: <u>12.21.64</u> Class: <u>1st</u> Date of Exam: <u>8-5-22</u>	
SIG. OF STUDENT	TYPE OF I.D. <input checked="" type="checkbox"/> Drivers License <input type="checkbox"/> Passport <input type="checkbox"/> Other	NAME OF INSTRUCTOR: <u>Derek Richardson</u>	SIG. OF INSTRUCTOR

**MANEUVERS/PROCEDURES GRADE** (S-Satisfactory U-Unsatisfactory)

AIRCRAFT SYSTEMS	Ground Trng	SCENARIO BASED TRAINING	Aircraft	Simulator	Ground Trng
1. Pneumatic System	✓	20. Weather / WT & Balance			
2. Pressurization System	✓	21. Performance			
3. Air Conditioning System	✓	22. Enroute			
4. Fuel System	✓	23. Approach / Landing		S	
5. Electrical System	✓	<b>INSTRUMENT PROCEDURES</b>			
6. Hydraulic System		23. Area Departure			
7. Flight Controls / Flaps		24. Holding			
8. Powerplant	✓	25. Area Arrival			
9. Anti-Icing / De-Icing Protection	✓	26. ILS Approaches		S	
10. Landing Gear & Brake System	✓	27. Other Instrument Approaches			
11. Stall Warning Devices		Approaches: GPS		S	
12. Master Warning System		VOR			
13. Avionics	✓	LOC			
14. Oil System		Other (Specify)			
15. Environmental Systems	✓	28. Circling Approaches			
16. Oxygen System		29. Missed Approaches		S	
17. Pilot Static System		30. Comm./Nav. Procedures		S	
18. Other Specify		31. Use of Auto Pilot		S	
<b>PREFLIGHT</b>		<b>SCENARIO BASED EMERGENCY / ABNORMAL TRAINING</b>			
1. Equipment Examination (Oral or Written)		1. Aircraft Fires / Smoke Control			✓
2. Preflight Inspection		2. Pressurization Malfunctions		S	✓
3. Taxiing		3. Engine Malfunctions		S	✓
4. Powerplant Checks	S	4. Electrical, Hydraulic, Pneumatic Malfunctions		S	✓
<b>TAKEOFFS</b>		5. Flight Control Systems Malfunctions			✓
5. Normal	S	6. Landing Gear and Flap Malfunctions			
6. Instrument		7. Emergency Descent		S	✓
7. Crosswind		<b>GENERAL</b>			
8. With Simulated Powerplant Failure	S	1. Judgment	S	U	
9. Rejected Takeoff	S	2. Crew Coordination / CRM / SPRM / ADM	S		
<b>INFLIGHT MANEUVERS</b>		FLIGHT TIME	GROUND TRAINING	SIMULATOR TIME	
10. Steep Turns	S		3.0	2.1	
11. Approach to Stalls					
12. Specific Flight Characteristics					
13. Powerplant Failure / Shutdown	S	FLIGHT REVIEW: \$61.56	<input type="checkbox"/> SAT	DATE _____	
<b>LANDINGS</b>		INSTRUMENT PROFICIENCY	<input type="checkbox"/> SAT	DATE _____	
14. Normal	S	CHECK: \$61.57 (d)			
15. From ILS	S	Notes: <u>Pro Pilot, no issues, excellent</u>			
16. Crosswind		<u>Systems knowledge good</u>			
17. With Simulated Powerplant(s) Failure	S	<u>checklist use, good flows.</u>			
18. Rejected Landing	S	<u>sim fuel x16 ex drx met.</u>			
19. From Circling Approach		<u>no issues.</u>			

RESULT OF CHECK:  Approved  Disapproved

# FLIGHT SAFETY TEXTRON AVIATION

• TRAINING •

*Certifies that*

***Jerry Wayne Eichelberger***

---

*has satisfactorily completed a course of*

***Citation Sovereign (CE-680) Prior Experience***

---

*Conferred on* 21st day of October, 2022



*The best safety device in any aircraft  
is a well-trained pilot.*

Authorized Signatory  
Atlanta Learning Center

**FlightSafety**  
**Textron Aviation**

---

TRAINING



**RECORD OF TRAINING / CHECKING**

**Jerry Wayne Eichelberger**  
**Eichelberger Aviation, LLC**  
 during the period October 17, 2022 through October 21, 2022 has completed  
**Eichelberger Aviation, LLC's**  
**Citation Sovereign (CE-680) Prior Experience Course**  
 Model: *Citation Sovereign*

**Ground Training Curriculum**

Review and Examination	Master Warning	Stall Recognition and Recovery Procedures
Aircraft General	Ice and Rain Protection	Landing Gear and Brakes
Electrical	Fire Protection	Windshear Training
Lighting	Oxygen	Performance
Fuel	Pressurization	Flight Planning
Powerplant	Avionics/Communications	Weight & Balance
Thrust Reverser	Hydraulics	Approved AFM/AOM
Water and Waste	Flight Controls	Crew/Single Pilot Resource Management (CRM/SRM)
Pneumatics	Air Conditioning	Systems Integration
Auxiliary Power Unit (APU)	Pitot-Static	

Ground Training Hours: 13.50  
 Briefing/Debriefing Hours: 6.00

**Flight Training Curriculum**

<b>Flight Simulator:</b>	Pilot Flying .....	8.00
	Pilot Monitoring .....	8.00
	<b>Total Hours:</b>	16.00

**Qualification Curriculum**

Oral/Preflight Assessment (Inspection) .....	2.50	<b>Flight Simulator:</b> Pilot Flying .....	2.50
Briefing/Debriefing .....	1.00	Pilot Monitoring .....	0.00
		<b>Aircraft:</b> Pilot Flying .....	0.00
		Pilot Monitoring .....	0.00

FAR 61 Test/Checks: 61.157 (Type Rating)[✓]

**Remarks**

FlightSafety International issued pro card.



Brian Carhide - Authorized Signatory

Atlanta Learning Center

31Oct22

Date



# Certificate of COVID-19 Vaccination



Vaccination is considered complete after two weeks have passed since the second dose of mRNA vaccines or first dose of single-dose vaccines.

## Vaccination Series COMPLETE

Name: JERRY WAYNE EICHELBERGER

Date of Birth: 12/21/1964

### Dose 1

Date: 05/06/21

Manufacturer: Pfizer

Lot number: ER8731

### Dose 2

Date: 07/21/21

Manufacturer: Pfizer

Lot number: FA7485

### Dose 3 (if applicable)

Date: \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Lot number: \_\_\_\_\_



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Certified by Mississippi State Department of Health

ON 3/11/2022

**Dumont JETS** 

**ONLINE TRAINING**

**CERTIFICATE OF COMPLETION**

**Jerry Eichelberger**

**HAS SUCCESSFULLY COMPLETED**

**Worldwide International Procedures Initial v5.0  
HLA (MNPS), RVSM, ADS-B, CPDLC, CPDLC DCL  
Performance Based Navigation, P-RNAV, B-RNAV**

**23 FEBRUARY 2022**

**via the ASCENT E-training System**

Student E-mail: G4PilotMS@gmail.com



Cut Along This Line



UNITED STATES OF AMERICA  
FEDERAL COMMUNICATIONS COMMISSION

Restricted Radiotelephone Operator Permit



ATTN: JERRY EICHELBERGER  
EICHELBERGER, JERRY W  
320 GLADEVIEW PLACE  
BRANDON, MS 39047

FCC Registration Number (FRN): 0004263851

Special Conditions / Endorsements

NONE

Grant Date	Effective Date	Print Date	Expiration Date
01-18-2012	05-10-2022	05-10-2022	
File Number	Serial Number	Date of Birth	
0010042412	RR00084090	12-21-1964	

THIS LICENSE IS NOT TRANSFERABLE

(Licensee's Signature)

FCC 605-FRC - August 2021

Cut Along This

Cut Along This

Serial Number	Grant Date	Expiration Date	File Number	Print Date	Effective Date
RR00084090	01-18-2012		0010042412	05-10-2022	05-10-2022
Date of Birth	FCC Registration Number (FRN)	THIS LICENSE IS NOT TRANSFERABLE			
12-21-1964	0004263851	Special Conditions / Endorsements:			
		NONE			
ATTN: JERRY EICHELBERGER EICHELBERGER, JERRY W 320 GLADEVIEW PLACE BRANDON, MS 39047			 (Licensee's Signature) FEDERAL COMMUNICATIONS COMMISSION		
<b>Restricted Radiotelephone Operator Permit</b> FCC 605-FRC - August 2021					

Licensee: This is your radio authorization in sizes suitable for your wallet and for framing. Carefully cut the documents along the lines as indicated.

The Commission suggests that the wallet size version be laminated (or another similar document protection process) after signing. The Commission has found, under certain circumstances, laser print is subject to displacement.

Cut Along This

Cut Along This

Cut Along This

Cut Along This

Cut Along This



# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://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.  
**JERRY W. EICHELBERGER**

**2** Business name/disregarded entity name, if different from above  
**EICHELBERGER AVIATION, LLC**

**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.  
**320 GLADEVIEW PLACE**

**6** City, state, and ZIP code  
**BRANDON, MS 39047-5015**

**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**

4	8			-	1	2	8	7	6	8	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 the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign Here**    Signature of U.S. person ▶     Date ▶ **02/07/2022**

## 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](http://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.*