

VAN ALSTYNE IND SCHOOL DIST

Product	Price	Quantity	Subtotal
School Account			
School Account services through June 30, 2025. Includes an unlimited number of staff, student, and administrator accounts within the school.	\$3,500.00	3	\$10,500.00

Tax* \$0.00

Total \$10,500.00

^{*}Tax is <u>not</u> included in the above quote. Tax will be added to your invoice, if applicable. If your school or district is tax-exempt, please <u>upload a copy of your tax exemption certificate</u> in order to receive a tax-free invoice.



To Order Zearn School Account(s) and/or Professional Development:

• To order Zearn School Account(s), Printed Materials, and/or Professional Learning, please email your Zearn contact with a purchase order. If your school/district pays for services with a credit card, please send a written acceptance of this order and the Quote number to your Zearn contact to receive an invoice with a credit card payment link.

TERMS OF AGREEMENT

This Quote is a binding offer to provide the products and/or services detailed herein. This offer is expressly and exclusively conditioned upon the purchasing school or district (the "Account Holder") assent to and acceptance of the Terms of Service available at the following link:

https://webassets.zearn.org/resources/Zearn_Terms_of_Service_25_26.pdf

By submitting a purchase order, Account Holder agrees to be legally bound by the Terms of Service. Any and all additional, different, or conflicting terms presented by Account Holder in a purchase order or any other communication are hereby rejected and shall not apply unless expressly agreed to in writing by Zearn. The Terms of Service shall control and supersede all other documents exchanged by the parties.



Form W-9
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Befor	re you begin. For guidance related to the purpose of Form W-9, see Put	rpose of Form, below.										
	Name of entity/individual. An entry is required. (For a sole proprietor or disreentity's name on line 2.)	garded entity, enter the own	ner's name	on li	ne 1, and	d ente	r the b	usines	s/disi	regarded		
	Zearn											
n page 3.	2 Business name/disregarded entity name, if different from above.											
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. Individual/sole proprietor					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
e.	LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)					Exempt payee code (if any)						
Print or type.	Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.					Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)						
Prin :	✓ Other (see instructions) 501c (3) nonprofit					e (II al	^{1y)} —					
Print or type. See Specific Instructions on page	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions				(Applies to accounts maintained outside the United States.)							
See	5 Address (number, street, and apt. or suite no.). See instructions.	F	Requester's	s nam	e and ac	dres	s (optio	nal)				
0,	PO Box 24580											
	6 City, state, and ZIP code											
	New York, NY 10087 - 4580											
	7 List account number(s) here (optional)											
	Townson Identification Number (TIN)								_			
Pa			8/	ocial :	security	num	her					
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid			ia 🗀					$\overline{}$	$\overline{}$			
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			a		-		-	-				
entities, it is your employer identification number (EIN). If you do not have a number, see How to get a			a or	or								
TIN, later.			_	Employer identification number								
Note: If the account is in more than one name, see the instructions for line 1. <i>Number To Give the Requester</i> for guidelines on whose number to enter.		See also What Name and 3			- 1	6	6	5 7	4	5		
Par	t II Certification											
Unde	r penalties of perjury, I certify that:											
1. The	e number shown on this form is my correct taxpayer identification numb	er (or I am waiting for a	number t	o be	issued	to m	e); and	t				
Se	n not subject to backup withholding because (a) I am exempt from back vice (IRS) that I am subject to backup withholding as a result of a failure longer subject to backup withholding; and											
3. I a	m a U.S. citizen or other U.S. person (defined below); and											
4. The	e FATCA code(s) entered on this form (if any) indicating that I am exemp	t from FATCA reporting	is correc	t.								
becau acqui	fication instructions. You must cross out item 2 above if you have been not use you have failed to report all interest and dividends on your tax return. Fistion or abandonment of secured property, cancellation of debt, contribution than interest and dividends, you are not required to sign the certification, to	or real estate transaction ions to an individual retire	ns, item 2 o ement arra	does anger	not app nent (IR	ly. Fo A), ai	or mor	tgage nerally	inter , pay	est paid ments		
Sign	Signature of .	_{Date} 1/10/2025										
Section	neral Instructions on references are to the Internal Revenue Code unless otherwise	New line 3b has bee required to complete t foreign partners, owne	this line to ers, or be	indi nefici	cate tha	at it h hen i	nas dir it provi	ect or ides t	r indi	rect orm W-9		
noted	l. re developments. For the latest information about developments	to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information										
relate	elated to Form W-9 and its instructions, such as legislation enacted later they were published, go to www.irs.gov/FormW9.											

What's New
Line 3a has been modified to clarify how a disregarded entity completes

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this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Purpose of Form