

2025-2026 Non-Public School Transportation Reimbursement Agreement

Transportation@shakopee.k12.mn.us

This agreement dated (hereinafter "Agreement") by and between Independent School District 720, a Minnesota municipal corporation, (hereinafter referred to as "the School District") and:											
Parent Driver Name:											
Pho	ne:		E	mail:							
1.0	bou	ntractor (Parent/Guard undaries of School Dis avened, to and from th	trict 720. Ti	ransportation sh	all be provided by t	the Contractor for e	ach day school is				
	1.	Student Name	Age	Grade	School	Name	School Phone #				
	2.	Student Name	Age	Grade	School	Name	School Phone #				
	3.	Student Name	Age	Grade	School	Name	School Phone #				
	4.	Student Name	Age	Grade	School	Name	School Phone #				
3.0	Year Wh	e standards for convenucation and any legal of 2.1 Mode of Transport 2.2 If Carpool or Farman Make Make there a Carpool or Family keep enforce the vehicle eement.	requirement ortation: Sch mily Vehicle Type	is of the State of nool Bus Comme is used, this equ used to provide	f Minnesota. Proial Carrier Carpoo ipment initially will VIN # transportation serv	ol / Family Vehicle. be as follows: Capacity vices, the Contractor	License #				
	Insurance Carrier				;						
4.0	The term of this Agreement shall be for a period not to exceed 172 days per pupil commencing on(date) and ending on(date) for transportation services described in this Agreement. The School District agrees to pay the Contractor a sum per our policy per student. This amount may be altered by the days each student is in membership at the school of attendance by the method of transportation services described herein. In no event will the amount exceed the actual cost of the service furnished by the Contractor. Payment will be made at the close of the school year and upon verification of membership from the attending school.										
5.0		e Contractor cannot as proval of the School Di	_	sfer any part of I	nis/her interest in th	nis agreement witho	out the written				
By:		Parent/Contractor Signati	Date	::I	By:	Da	ate:				

(Rev. October 2018) Department of the Trea 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.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.												
Print or type. Specific Instructions on page 3.	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.							4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC							Exempt payee code (if any)					
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partner	_											
	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.							Exemption from FATCA reporting code (if any)					
Ğ.	Other (see instructions)						(Applies to accounts maintained outside the U.S.)						
Sp	5 Address (number, street, and apt. or suite no.) See instructions.	Requeste	r's nar	ne a	ınd ad	Idress	(option	al)					
See													
S	6 City, state, and ZIP code												
	7 List account number(s) here (optional)												
Par	Taxpayer Identification Number (TIN)												
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	oid	Social	sec	urity	numbe	er						
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					-	1	-	1					
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.													
,						r identification number							
Number To Give the Requester for guidelines on whose number to enter.							$\overline{}$	\Box					
					-								
Par	Certification												
	penalties of perjury, I certify that:						-	-					
1. 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													
2. I ar Ser	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b vice (IRS) that I am subject to backup withholding as a result of a failure to report all interest longer subject to backup withholding; and) I have n	ot bee	n no	otifie	d by tl	he Inte						
3. I ar	n a U.S. citizen or other U.S. person (defined below); and												
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportir	ng is corre	ect.										
you ha	ication instructions. You must cross out item 2 above if you have been notified by the IRS that you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 sition or abandonment of secured property, cancellation of debt, contributions to an individual reting than interest and dividends, you are not required to sign the certification, but you must provide you	does not ement arr	apply angen	. Fo	r mor (IRA)	tgage , and	interes genera	st paid ally, pa	, ymen	ts			

U.S. person ▶ General Instructions

Signature of

Section references are to the Internal Revenue Code unless otherwise

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

Sign

Here

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.

Cat. No. 10231X

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual
- Form 1099-MISC (various types of income, prizes, awards, or gross
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)

Date ▶

- 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,