



# NACHSA National Association of County Human Services Administrators

An Affiliate Organization of NACo  National Association of Counties

January 1, 2021

Dear Director:

The National Association of County Human Services Administrators (NACHSA) appreciates your past support and asks you to renew your 2021 dues today.

Last year, NACHSA advocated on behalf of counties during the multiple COVID-19 relief negotiations and on a number of regulatory issues. Those efforts included:

- **COVID:** Through multiple letters to Congress and discussions with key staff, NACHSA advocated for measures to protect and support low-income families. NACHSA also conducted frequent COVID Check-In Zoom calls with the Board and many state association executives to share information and support county directors facing emerging challenges due to the pandemic.
- **SNAP:** The Association pushed back on proposed rules to limit Supplemental Nutrition Assistance Program (SNAP) benefits to single individuals unable to find work and other rules to restrict counties' administrative flexibility to serve families and individuals who depend upon it during times of financial stress.
- **Homelessness and Housing:** The pandemic has challenged directors to find safe shelter to protect individuals from COVID and support those families who risk losing their homes because they are unable to pay rent. NACHSA participated on weekly national calls to strategize and support federal efforts to respond to the housing crisis and featured the issue in its first virtual summer meeting.
- **Child Welfare:** As counties prepare to implement the Family First Prevention Services Act (FFPSA), NACHSA took the lead developing policy for the National Association of Counties to urge Congress amend FFPSA to provide more flexibility in meeting the congregate care and prevention provisions. NACHSA is working with a variety of groups to craft legislative improvements to ensure a successful launch of the FFPSA.

NACHSA also regularly updates its members on federal developments and human services resources through its *e-Alerts*. Last year, members received 26 updates providing them with the latest federal developments, human services resources and the ability to post senior jobs within their agencies free of charge.

To continue and expand our work, we need you as a dues-paying member. Given prudent budgeting and stable membership, NACHSA dues remain at the level assessed 18 years ago. As the only national organization focused solely on representing county administrators, NACHSA remains a great investment and adds value to the work you do every day.

Thank you in advance for your support and participation. Enclosed is an invoice which is based on county population. If you have any other questions, please e-mail me at [ctuck@alachuacounty.us](mailto:ctuck@alachuacounty.us) or call 352.264.6704, or contact Tom Joseph at [tj@paragonlobbying.com](mailto:tj@paragonlobbying.com) or call 202.449.0398.

Sincerely,

Claudia H. Tuck  
NACHSA President  
Director, Community Support Services, Alachua County, Florida



# NACHSA National Association of County Human Services Administrators

An Affiliate Organization of NACo ★ National Association of Counties

## Calendar Year 2021 NACHSA Membership Dues Invoice

Membership Dues Rates	
County/State: _____	
County Population	
____ Less than 100,000	\$130
____ Greater than 100,000 but less than 250,000	\$315
____ Greater than 250,000 but less than 500,000	\$655
____ Greater than 500,000	\$1,310
Statewide Association Member: _____	
____ Statewide Association of County Human Services Administrators:	\$1,310

### Contact Information

Name: \_\_\_\_\_

Title: \_\_\_\_\_

County/Department: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_



Federal Tax ID: 52-2082778

**Please return this form with your dues to:**  
 Matt Kurtz, NACHSA Treasurer  
 Director, Knox County Department of Job and Family Services  
 PO Box 334  
 Mount Vernon, OH 43050  
**Please remit dues payable to: NACHSA**

## 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.

See Specific Instructions on page 3.

<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>National Association of County Human Services Administrators</b>	
<b>2</b> Business name/disregarded entity name, if different from above	
<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> 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 <b>not</b> 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.  <input checked="" type="checkbox"/> Other (see instructions) ▶ <b>Non-profit corporation exempt under IRS Code Section 501(c)(3)</b>	<b>4</b> 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) _____  <i>(Applies to accounts maintained outside the U.S.)</i>
<b>5</b> Address (number, street, and apt. or suite no.) See instructions. <b>PO Box 334</b>	Requester's name and address (optional)
<b>6</b> City, state, and ZIP code <b>Mount Vernon, OH 43050</b>	
<b>7</b> List account number(s) here (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.

<b>Social security number</b>										
<b>or</b>										
<b>Employer identification number</b>										
5	2		-	2	0	8	2	7	7	8

### Part II Certification

Under 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 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
3. I am 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 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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <u>May 14, 2019</u>
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### 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.*