

CONFIDENTIAL W-9 FORM

In order to receive a Settlement Award, you must timely complete and return this Substitute W-9 Form and the Consent to Join and Claim Form.

**Substitute W-9
Taxpayer Identification Number Certification**

Enter your Social Security Number (taxpayer identification number): _____

Print name and address as shown on your income tax return:

First Name & Middle Initial: _____ Last Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Under penalties of perjury, I certify that:

- 1.** The taxpayer identification number shown on this form is my correct taxpayer identification number, **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 (including a U.S. resident alien).

Note: If you have been notified by the IRS that you are subject to backup withholding, you must cross out item 2 above.

Signature
of U.S. Person: _____ Date: _____

RETURN THIS SIGNED SUBSTITUTE W-9 AND CLAIM FORM TO:

Oates v. Kinder Morgan Energy Partners, L.P.
c/o CPT Group, Inc.
50 Corporate Park
Irvine, CA 92606
Fax: (949) 419-3446
1-(888) 602-3304
Email: OatesKMSettlement@cptgroup.com

Kinder Morgan Overtime Settlement

THIS FORM AND THE CONSENT TO JOIN AND CLAIM FORM MUST BE COMPLETED IN FULL AND MAILED, EMAILED, OR FAXED TO THE SETTLEMENT ADMINISTRATOR POSTMARKED ON OR BEFORE APRIL 22, 2024.