

2019/20 Bering Sea Tanner Crab Disaster Relief Captains and Crew Application

CRITERIA FOR RELIEF:

- Captains and crew **MUST** have participated in the WBT IFQ fishery on an eligible vessel as defined for vessel-based payments.
 - Eligibility will be verified based on 1) crew contract, 2) crew settlement, or 3) an affidavit from the vessel owner or CFEC permit holder.
 - **It is the sole responsibility of the captain or crew member to submit this documentation. Vessel owners / CFEC permit holders are NOT responsible for submitting documentation.**
 - Eligibility for captains may also be verified from the CFEC permit information on Fish Tickets.
 - **Captains and crew submitting affidavits MUST use PSMFC's affidavit. Copies can be found at: <https://relief.psmfc.org/>**
- Captains **MUST** have held a CFEC T91Q permit for each season they are claiming eligibility.
- Crew **MUST** have held a commercial crew license or CFEC permit for any fishery for each season they are claiming eligibility.
 - These requirements are met by holding a permit or license in 2017 or 2018 for the 2017/18 season and in 2018 or 2019 for the 2018/19 season.

REQUIREMENTS FOR PAYMENT:

- **MUST** sign this application / affidavit.
- **MUST** submit a completed and signed W-9 tax form along with your application.
- **MUST** submit a qualifying crew contract, crew settlement, or an affidavit from the eligible vessel owner or CFEC permit holder along with your application.
- **MUST** postmark application for return no later than September 20th, 2024.
Applications postmarked late will NOT be accepted.
- **ALTERNATIVELY**, completed applications may be uploaded to PSMFC's ShareFile online depository.
 - Those uploading completed applications **MUST** do so by 11:59pm (AKDT) on September 20th, 2024. **Applications uploaded late will NOT be accepted.**

DISTRIBUTION OF FUNDS: \$1,545,255 (20.7% of Harvester Funds).

- Vessel-based payments will be split 70/30 between vessel owners and captains/crew based on the proportion of fishery revenues paid to captains and crew, after deducting lease fees, for the 2018 Tanner crab fishery as reported in the January 2022 economic status report.
- Direct payments to minors are **NOT** authorized by the terms of the Federal grant but may be authorized to guardians in the same household on behalf of an eligible minor.

ESTIMATED BASE PAYMENT:

- Vessel-based payments will be calculated pro rata to each eligible vessel's proportion of the total 2017/18 and 2018/19 pounds of WBT crab, not including dead loss, landed by all eligible vessels.
- **30% of each eligible vessel's payment will be shared by the captains and crew who worked on the vessel during the 2017/18 and 2018/19 seasons and who meet all eligibility criteria.**

INSTRUCTIONS - DO NOT PRINT OR RETURN.

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2019/20 Bering Sea Tanner Crab Disaster Relief Captains and Crew Application

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Telephone #: _____

Email Address: _____

Qualifying Vessel Name: _____

Individuals may qualify on the same vessel for a captain share in one season and a crew share in the other season but may NOT qualify for both a captain and crew share on the same vessel for the same season.

Indicate your participation below:

| Season | 2017/18 | 2018/19 |
|---------|---------|---------|
| Captain | | |
| Crew | | |

| Example | | |
|---------|---------|---------|
| Season | 2017/18 | 2018/19 |
| Captain | | X |
| Crew | X | |

In this example, the applicant was a crew member in 2017/18 and a captain in 2018/19.

Captains Only:

• 2017/18 T91Q permit serial: _____

• 2018/19 T91Q permit serial: _____

Example: T91Q-12345A

Crew Only:

2017/18 Commercial Crew license or
CFEC permit serial

2018/19 Commercial Crew license or
CFEC permit serial

If a crew license number is unknown, write "Unknown" and PSMFC will verify.

MUST BE RETURNED

Captains and crew:

As proof of participation, I am submitting one of the following:

- Crew Contract Affidavit from eligible vessel owner or CFEC permit holder
- Crew Settlement

I certify that this application is true and accurate and that I am eligible for the 2019/20 Tanner Crab Disaster Relief Funds.

Signature: _____ **Date:** _____

Print Name: _____

Return your completed application and W-9 to:

Pacific States Marine Fisheries Commission
Attn: 2019-20 WBT Disaster
205 SE Spokane Street, Suite 100
Portland, OR 97202

- **MUST** postmark application for return no later than **September 20th, 2024.**

OR

PSMFC ShareFile Upload:

<https://psmfc.sharefile.com/r-r3f58be4c3dc24dd9ba67dfc05c88acce>

- Uploads **MUST** be submitted by **11:59pm (AKDT) on September 20th, 2024**



- For **spend plan** questions, please contact ADF&G at: dfg.com.fisheriesdisasters@alaska.gov
or call Darion Jones: (907) 267-2593
- For **application** questions please contact PSMFC at: AKFishDisaster@psmfc.org
or call (888) 517-7262

ALL payments will be issued at the same time, after the close of the application period.

Your payment will be mailed to the address on your W-9 form. Please be certain that address is correct and is where you receive mail.

ALL FUNDS RECEIVED ARE TAXABLE - Subject to Self-Employment and/or Income Taxes.

MUST BE RETURNED

**2019/20 Bering Sea Tanner Crab
Captains and Crew Member Affidavit Form**

PLEASE NOTE

It is the sole responsibility of the captain or crew applicant to submit this affidavit along with their complete application and W-9 form.

It is **NOT** the responsibility of the vessel owner or CFEC permit holder to submit this documentation on behalf of the captain or crew applicant.

SECTION TO BE COMPLETED BY THE CAPTAIN / CREW MEMBER:

Captain / Crew Name: _____
LAST, FIRST MI

Phone: _____ Email: _____

Name of the vessel you work on during the respective seasons.

2017/18 Vessel: _____ 2018/19 Vessel: _____

Captain / Crew Signature: _____ Date: _____

SECTION TO BE COMPLETED BY VESSEL OWNER OR CFEC PERMIT HOLDER:

Name: _____ Phone: _____
LAST, FIRST MI

Vessel: _____ Email: _____

Enter ADFG #

Enter Permit Serial

ADFG Number: _____ CFEC Permit Serial: _____
5-digit number e.g., T91Q-12345A

I attest under penalty of perjury that _____ was a crew member working on the
(write above crew member's name)

F/V _____ during the 2017/18 _____ and/or 2018/19 _____ WBT fishing seasons.
(write eligible vessel's name) (check where applicable)

Signature: _____ Date: _____

W-9 Form Instructions

Errors and omissions made on W-9 forms are the largest contribution to delays in processing applications. Please note, without a complete W-9 form we cannot process your application.

Please review the following guidance for completing your W-9 form. Additional guidance and forms can be found at www.irs.gov

1. If you are an **individual / sole proprietor** you **MUST**:
 - List your name on line #1,
 - Use your Social Security Number,
 - Enter your legal address,
 - Sign the form,
 - Date the form.
2. If your business is a **single-member LLC** you **MUST**:
 - List the name of the individual or the business/partnership who owns the LLC on line #1,
 - List the name of the LLC on line #2,
 - If an individual is listed on line #1, use their Social Security Number or if a business or partnership is listed on line #1 use their Employer Identification Number (EIN),
 - Enter your legal address for the entity listed on line #1,
 - Sign the form,
 - Date the form.
3. If your business is a **C-Corporation, S-Corporation, Partnership** you **MUST**:
 - List the Business Name line #1,
 - Use an Employer Identification Number (EIN),
 - Enter the business's legal address,
 - An authorized representative must sign,
 - Date the form.
4. If you are a **Trust/Estate** you **MUST**:
 - List the name of the trust or estate on line #1.
 - Living or revocable trusts (trustee is current alive) would be required to use a Social Security Number.
 - Irrevocable trusts (trustee is deceased) would be required to use an Employer Identification Number (EIN),
 - Enter the trust/estate's legal address,
 - An authorized representative must sign,
 - Date the form.
5. If you are an **LLC-C, LLC-S, or LLC-P (not common)** you **MUST**:
 - List the Business Name on line #1,
 - Use an Employer Identification Number (EIN),
 - Enter the business's legal address,
 - An authorized representative must sign,
 - Date the form.

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.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

| | | | | |
|--|-----------|---|---|--|
| Print or type. See Specific Instructions on page 3. | 1 | Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) | | |
| | 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. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ 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. <input type="checkbox"/> 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 Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i> | |
| | 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 _____ <input type="checkbox"/> | | |
| | 5 | Address (number, street, and apt. or suite no.). See instructions. | Requester's name and address (optional) | |
| | 6 | City, state, and ZIP code | | |
| | 7 | 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.

| | | | | | | | | | |
|---------------------------------------|--|--|--|---|--|--|--|--|--|
| Social security number | | | | | | | | | |
| | | | | - | | | | | |
| or | | | | | | | | | |
| Employer identification number | | | | | | | | | |
| | | | | | | | | | |

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

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.

| | | |
|------------------|--------------------------|------|
| Sign Here | Signature of U.S. person | Date |
|------------------|--------------------------|------|

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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes 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.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

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