

Made to fit.

Electronic Sales Person Incentive Instructions

If you are creating a new account, follow the below instructions.

Step 1: Print the W9 for US or W8 for Canada (form attached to these instructions), fill it out with your name, home address, social security number, then sign and date it.

Step 2: Once completed, scan and save the form.

Ň	2 Business name/disregarded entity name, if different from above		
s on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes:	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
Print or type c Instructions	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership	Exempt payee code (if any)	
uct t	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the	Exemption from FATCA reporting	
int o	the tax classification of the single-member owner.		code (if any)
<u>E</u> <u>-</u>	Other (see instructions) ►		(Applies to accounts maintained outside the U.S.)
cifi	5 ^{-Address} (number, street, and apt. or suite no.)	Requester's name a	and address (optional)
P See Specific	6 City, state, and ZIP code		
0	7 List account number(s) here (optional)		
Par	Taxpayer Identification Number (TIN)		
			curity number
backu	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo p withholding. For individuals, this is generally your social security number (SSN). However, for nt alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other		
	s, it is your employer identification number (EIN). If you do not have a number, see <i>How to get</i> a page 3.	or	
	If the account is in more than one name, see the instructions for line 1 and the chart on page 4 ines on whose number to enter.	for Employer	-

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 on page 3.

Sign	Signature of
Here	U.S. person

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted. Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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 taxpaver 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)

Date •

•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? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

Form	N-8BEN	Certificate of Foreign States Tax Withho	Status of Beneficial Iding and Reporting		
(Rev. January 2017) Department of the Treasury Internal Revenue Service		 For use by individuals. Entities must use Form W-8BEN-E. Information about Form W-8BEN and its separate instructions is at <u>www.irs.gov/formw8ben.</u> Give this form to the withholding agent or payer. Do not send to the IRS. 			OMB No. 1545-1621
			itinoiding agent or payer. Do no	ot send to the IRS.	
	OT use this form if				Instead, use Form:
	are NOT an individ				W-8BEN-E
		or other U.S. person, including a resider			W-9
		rer claiming that income is effectively c			U.S.
•	·	ner who is receiving compensation for p		the United States	
		g as an intermediary			
Note:		in a FATCA partner jurisdiction (i.e., a M			
Par	Identific	ation of Beneficial Owner (see	instructions)		
1		al who is the beneficial owner	,	2 Country of citizenship	
3	Permanent reside	ence address (street, apt. or suite no., o	r rural route). Do not use a P.	O. box or in-care-of addres	SS.
	City or town, stat	e or province. Include postal code wher	e appropriate.	Country	/
4	Mailing address	(if different from above)			
	City or town, stat	e or province. Include postal code where	e appropriate.	Country	,
5	U.S. taxpayer ide	entification number (SSN or ITIN), if requ	ired (see instructions)	6 Foreign tax identifying	number (see instructions)
7	Reference number	er(s) (see instructions)	8 Date of birth (MM-DD-	YYY) (see instructions)	
				, , , , , , , , , , , , , , , , , , ,	
Part		f Tax Treaty Benefits (for chapte		,	
9		peneficial owner is a resident of		within the	meaning of the income tax
		ne United States and that country.	tions). The boundining summer is		wiele end nevernerb
10	Special rates ar	id conditions (if applicable—see instruction of the treaty identified or	tions): The beneficial owner is line 9 above to claim a	•	
	Explain the addit	ional conditions in the Article and parag	raph the beneficial owner mee	ets to be eligible for the rate	of withholding:
Part	111				
•		that is the beneficial owner (or am authorized t	o sign for the individual that is the	beneficial owner) of all the incom	ne to which this form relates or
	-	to document myself for chapter 4 purposes, on line 1 of this form is not a U.S. person,			
•		this form relates is:			
		onnected with the conduct of a trade or busine	ess in the United States,		
	(b) effectively conn	ected but is not subject to tax under an applic	able income tax treaty, or		
	(c) the partner's sha	are of a partnership's effectively connected inc	come,		
•		on line 1 of this form is a resident of the treaty nd that country, and	country listed on line 9 of the form	n (if any) within the meaning of th	e income tax treaty between
•	For broker transact	ions or barter exchanges, the beneficial owne	r is an exempt foreign person as d	efined in the instructions.	
	any withholding age	orize this form to be provided to any withholdi ent that can disburse or make payments of the made on this form becomes incorrect.			
Sian	Horo				
Sign	Here	Signature of beneficial owner (or individua	al authorized to sign for beneficial		Date (MM-DD-YYYY)
				,	· /
	Print	name of signer	c	Capacity in which acting (if form is	not signed by beneficial owner)

Go to <u>www.thormotorcoach.com/dealers-only</u>. If you are signing up for a new account, click the "NEED TO SIGN UP FOR A SPIFF ACCOUNT?" link. If you have and existing account, click the "ALREADY HAVE A SPIFF ACCOUNT?" link.

NEED TO SI	GN UP FOR A SP	IFF ACCOUNT? CLI	CK HERE	
ALREADY H	AVE A SPIFF AC	COUNT? CLICK HEI	RE	
(On the next pa	age, please enter y	our spiff username i.e	e. dlr\#### or ##	###@dlr and passwo

New users will fill out the form and click the submit button. The example is below.

	New User Request
io requ	uest a new Insight user account, please complete the form below. If you have any questions call (800) 860-5658 x4561.
FIRST NAME *	
LAST NAME*	BIRTHDATE* (MM/DD/YYYY) 😯
DEALER ID* Lookup Dealer ID	JOB TITLE*
PHONE #*	EMAIL* ?
PASSWORD* 😧	REPEAT PASSWORD*
	SECURITY ANSWER*
Select	v
	* Required

	Thank you for your request.
You	will be receiving an email shortly asking you to confirm your submission

You will then receive an email to confirm your submission and email. Click on Confirm. If you do not receive the email, please contact us.

avalanotifications@avalamarketing.com [BULK] Insight SPIFF Account Jane Doe, Thank you for your Insight SPIFF account request. Please click the link below to confirm your email. Confirm

Jane Doe,

Thank you for your Insight SPIFF account request.

Please click the link below to confirm your email.

<u>Confirm</u>

Once an administrator pulls in your information, you will receive an email with your username and password.

Jane Doe, Your request for your current Thor Motor Coach SPIFF account. You may log in <u>Here</u>.

USERNAME: 37093@dlr PASSWORD: Volleyball1

Your Primary Dealership is:

You may then click the "Here" link, which will direct you to enter your username and password.

Connecting to thormotorcoach	service.com.
User name	
Password	
Domain: TMCRV	
Remember my credentials	
ОК	Cancel

User Name:	User Name:	37093@dlr
Password:	Password:	Volleyball1
Log In Cancel		
		Log In Cancel

Your spiff username will be the 5 digit number you were assigned followed by @dlr i.e. 33333@dlr (The "DLR" must be lowercase -- the middle letter is a lowercase L)

Your username is **NOT** your email address!

* If something other than your correct username pops up in the username box, you need to click "Use another account or More Choices then Use another account" then type in your #####@dlr

Your password IS case sensitive.

Once you have logged in, you will go to "Spiff User Set Up" and complete the "Personal Information" section with your home address, mailing address (if different than your home), your social security number and attach your completed W9, which you have already saved to your computer. Once you have done this, click the save changes button at the bottom of the screen. **See example below.**

 SPIFF User setup 	Customer account: 999999
	Name: Open Unit
	Address:
	Puur cas.
	E-mail: Web@TMCRV.com
	Telephone: Fax:
	User(s) 37093 - Doe, Jane
	Active dealers
	Customer account Name RequestCity RequestST Approved Denied Cancelled Default
	Default dealer setup
	Customer account override: 🔍 Default
	New dealer request
	Dealer name:
	Dealer state:
	Add dealer request
	Add dealer request
	Personal Information
	First name: Jane * Last name: Doe *
	Personal Street1: Personal Street2:
	City: State: "
	ZIP/postal Code:
	Mailing address
	Same as Personal Address:
	Mailing Street1: *Mailing Street1:
	City: * State: *
	ZIP/postal Code: *
	Personal Information
	Current SSN:
	SSN: *
	Telephone: 574-555-5555 E-mail: agraber@tmcrv.com
	Notes
	Add:
	W-9 REQUIRED: Please download a current W-9 Form by clicking here. Once completed use the File Attachment section below to submit.
	File attachment
	Browner
	Attach nie: Recommended image size of 1024 x 768, please keep under 1Mb
	Documents:
	Save changes

You will be placed on a 24hr. Hold for accounting to verify your W9.

If you have been are on the 24 hour hold for longer than 24 hours, there is an issue with your W9 and you will need to make sure you have attached a completed form.

Once you are completely approved, you can log into your account and go to unit SPIFF where you will enter the information for the motor home you sold and create your SPIFF.

Please Note: The warranty registration must be completed with our warranty department before you can claim your SPIFF. It can take up to four business days for a unit to get registered from the time it is sent in.

All SPIFFs must be claimed within 30 days of the retail delivery/warranty start date.

Main Lists We must receive the individual request for a spiff within 30 days of re	ومعوار بسورينا واوار الأوم
we must receive the individual request for a spin within 50 days of re	
	all delivery date
• Home of sold unit or the individual will NOT receive a spiff.	
SPIFF unit selection	
Unit SPIFF Personal Address Mailing address	
Account Jane Doe Jane Doe	
SPIFF User setup S55 USA Drive ,	
Elkhart, IN 46515	
E-mail: agraber@tmcrv.com Telephone: 574-555-5555	
User(s)	
37093 - Doe, Jane	
Current incentives in processes:	
· · · · · · · · · · · · · · · · · · ·]
🛩 SpiffType VIN Spiffstatus Item number Request Amt Approved Amt Created Approved Denied Approval notes	
Denied previous incentives: [(↓ ↓ ↓ ↓)] ✓ SpiffType VIN Spiff status Item number Request Amt Created Denied Notes Paid incentives: [(↓ ↓ ↓)]	· 中 中
SpiffType VIN Spiff status Item number Request Amt Approved Amt Created Approved Check# Check date Approv	val notes
New Unit SPIFF User: 37093 - Doe, Jane Customer account: 999999 > SPIFF type: STD-Standard > Amount: 0 Item group id: > Enter the VIN number: > VIN search must be 5 to 17 characters, or use the lookup function to complete search. Notes Add:	

*To enter your SPIFF, go half way down the page to "New Unit SPIFF"

*Select the SPIFF type (it automatically defaults to standard)

*Type in the SPIFF amount. If you don't know it, let it default to \$0 we will put in the approved amount once the SPIFF is verified.

*Select the item group ID (that is the brand that was sold - click the arrow down key to find the brand) *Type in the last 9 of the CHASSIS VIN. Please keep in mind we do not use O's in our VINs we only use zeros.

*Click on the create button.

If everything was done correctly, you will see "New Unit SPIFF completed" at the top of your screen. If you
get the message, "No registration on file or enter a VIN with a registration form filed" then your
dealership has NOT registered the coach with our warranty department. That MUST happen before
you can claim the SPIFF.

*Once the SPIFF has been completed you are done.

*Please do NOT enter a SPIFF more than once due to a dollar amount error, etc. We correct it on our end.

Sales	
Main Lists	We must receive the individual request for a spiff within 30 days of retail delivery date
 Home 	of sold unit or the individual will NOT receive a spiff.
 SPIFF Programs 	SPIFF unit selection
Unit SPIFF	Personal Address Mailing address
Account	Personal Address Mailing address Jane Doe Jane Doe
 SPIFF User setup 	555 USA Drive ,
	Elkhart, IN 46515
	E-mail: agraber@tmcrv.com Telephone: 574-555-5555
	User(s)
	37093 - Doe, Jane
	Current incentives in processes:
	🕫 SpiffType VIN Spiff status Item number Request Amt Approved Amt Created Approved Denied Approval notes
	Denied previous incentives:
	✓ SpiffType VIN Spiff status Item number Request Amt Created Denied Notes
	Paid incentives:
	[中 中 中]
	SpiffType VIN Spiff status Item number Request Amt Approved Amt Created Approved Check# Check Acte Approval notes
	New Unit SPIFF
	User: 37093 - Doe, Jane
	Customer account: 999999 V
	SPIFF type: STD-Standard V
	Amount: 0
	Item group id:
	VIN search must be 5 to 17 characters, or use the lookup function to complete search.
	Notes
	Add:
	Create
	Messages
	For suppoort managing your SPIFF account, please contact Amy Graber at 800-860-5658, or AGraber@TMCRV.com

Your SPIFF process is now complete.

You can log into your account at any time to check the status of your SPIFF.

Please Note: Checks are mailed four business days after the check date.

All SPIFFs must be claimed within 30 days of the retail delivery/warranty start date.

If you have forgotten you username or password, click the "Forgot Your Username/Password" link in our website.

If you have a change an address, you must log into your SPIFF account and click the tab "SPIFF USER SET UP" and change your personal address and click save changes.

If you change dealerships, please do not set up a new account. Email us and we would be happy to update your dealership information and email address information for you.