THE BLOCK LOGISTICS

SALT LAKE CITY | CHICAGO | LOS ANGELES | SAN FRANCISCO | DETROIT | MINNEAPOLIS

888.721.7221 www.shipblock.com hello@shipblock.com

Client Resources

Packet



REMITTANCE INFORMATION

THE BLOCK LOGISTICS, INC 280 Shuman Blvd, Suite 116 Naperville, IL 60563

DOMESTIC WIRES/ACH:

SIGNATURE BANK 9450 W. Bryn Mawr Avenue, Suite 300 Rosemont, IL 60018

ABA NO. 071026628 PRIMARY ACCOUNT: 7000064536 BENEFICIARY: THE BLOCK LOGISTICS, INC

INTERNATIONAL WIRES:

JP MORGAN CHASE NA 1 Chase Manhattan Plaza New York, NY 10005

ABA NO. 021000021 PRIMARY ACCOUNT: 955735227 SWIFT CODE: CHASUS33 BENEFICIARY: THE BLOCK LOGISTICS, INC

01/01/2024

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► Go to www.irs.gov/FormW9 for instructions and the latest information.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.							
	THE BLOCK LOGISTICS INC							
	2 Business name/disregarded entity name, if different from above							
page 3.								
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Ch following seven boxes.	4 Exemptions certain entities instructions on	, not individu					
e. ns on	☐ Individual/sole proprietor or	∟ Tru	st/estate	Exempt payee	code (if any)			
typ ctio	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partne							
Print or type. Specific Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member on LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a sin	Exemption from code (if any)	n FATCA rep	oorting				
P ific	is disregarded from the owner should check the appropriate box for the tax classification of its owner	or EEO triat						
Dec	Other (see instructions) ►	(Applies to accounts maintained outside the U.S.)						
	5 Address (number, street, and apt. or suite no.) See instructions.	Request	ter's name a	ind address (opt	ional)			
See	231 W 800 SOUTH, SUITE C							
6 City, state, and ZIP code SALT LAKE CITY, UT 84101-3022								
7 List account number(s) here (optional)								
Par	t 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 Social security number								
backup withholding. For individuals, this is generally your social security number (SSN). However, for a esident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other								
solution is your prophetor, or disregarded entry, see instructions for rait, later, for the rait and the rait								

TIN, later.	or
Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and	Employer identification number
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 ►	Statt	Date ► JANUARY 3, 2024
	•	Car O	

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*.

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)

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- 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. 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*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

• An individual who is a U.S. citizen or U.S. resident alien;

• A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;

An estate (other than a foreign estate); or

• A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

 In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;

• In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and

• In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,

2. You do not certify your TIN when required (see the instructions for Part II for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.



CARRIER SELECTION PROCESS

The Block Logistics values our partnerships with our active carriers and potential carriers in our network. Our vetting process ensures our customers that our network is consistent with our commitment to providing the best service possible.

The key requirements for all carriers to qualify as an approved partner are listed below. All criteria must be finalized for the qualification process to be completed.

Requirements:

- 1. Active MCH, USDOT, or Intrastate DOT number for a period greater than six months.
- 2. Sign our Motor Carrier Agreement by an authorized person and initial each page. Complete the Carrier Profile (This may be done on our Carrier Portal).
- 3. A valid Tax Identification number. (Completed W-9)
- 4. Satisfactory FMCSA safety rating.
- 5. All SMS Basic Scores must meet FMCSA standards.
- 6. Active insurance, confirmed with Certificate of Insurance, with the following minimum requirements:

a. General Liability / Property Damage	\$ 1,000,00
b. Auto liability	\$1,000,000 / \$5,000,000 for Hazmat Carriers
c. Cargo liability	\$100,000 (deductible no more than \$10,000)
d. Employer liability	\$ 500,000
e. Worker's compensation liability	Required in amounts provided by state law

Our compliance team monitors all active carriers in our network via various services that safeguard against changes in insurance, authority, and safety ratings. This guarantees that any lapses in qualifications will be addressed timely and ensures that carriers falling below our standards will not be on any loads until issues have been resolved. Our carrier network is the lifeline of our cusotmers supply chain and we always expect our carriers to maintain our established standards.

If you require additional coverage, industry specific qualifications, or any additional questions please contact us at 888-664-1696



September 29, 2020

GERRY POST BLOCK LOGISITICS, THE PO BOX 3354 SALT LAKE CITY, UT 84110-3354

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC) ASSIGNMENT

The Standard Carrier Alpha Code of BLXY has been assigned to:

BLOCK LOGISITICS, THE PO BOX 3354 SALT LAKE CITY, UT 84110-3354 MC-1020295 US DOT- 3245565

This Alpha Code will apply only to the company name shown above through June 30, 2021. Approximately two months prior to expiration of this SCAC, NMFTA will provide an invoice for renewal which must be promptly returned together with payment to ensure its continued validity. Should the company name, address or contact information need an update, please notify the National Motor Freight Association, Inc. at customerservice@nmfta.org.

If you participate in the Customs & Border Protection (CBP) ACE program and you have any issue with ACE and your SCAC, please contact CBP at the following address:

AMSSCAC@cbp.dhs.gov Customs and Border Protection Attention: SCAC Beauregard, Cube: A-105-3 1801 N. Beauregard Street Alexandria, VA 20598-1350

If you would also like to participate in the Automated Export System (AES) program, pleae email AMSSCAC@cbp.dhs.gov and askaes@census.gov a request to enable your SCAC for AES. All SCACs are automatically uploaded to ACE within 24 hours.

Alpha Codes ending with the letter "U" have been reserved for the identification of freight containers. If your Alpha Code ends with the letter "U", it should be used only for this purpose. A non-U ending Alpha Code should be obtained to satisfy other requirements such as company identification for Customs, Electronic Date Interchange, freight payments, tariffs, etc.

NOTICE: Assignment of the above listed SCAC is unrelated to participation in the National Motor Freight Classification (NMFC). Further, it does not confer membership in the National Motor Freight Traffic Association, inc. nor allow use of the NMFC in connection with freight rates. For participation and membership information, please call (703) 838-1810.

1001 North Fairfax Street • Suite 600 • 'Alexandria, VA 22314-1798 • ph: 703.838.1810 • fax: 703.683.1094 web: www.nmfla.org • email: scac@nmfla.org



1200 New Jersey Ave., S.E. Washington, DC 20690

SERVICE DATE February 5, 2020

DECISION MC-1020295 MEGA TRANS CORPORATION BURLINGAME, CA REENTITLED MEGA-TRANS CORPORATION D/B/A THE BLOCK LOGISTICS

On January 29, 2020, applicant filed a request to have the Federal Motor Carrier Safety Administration's records changed to reflect a name change.

It is ordered:

The Federal Motor Carrier Safety Administration's records are amended to reflect the carrier's name as MEGA-TRANS CORPORATION, D/B/A THE BLOCK LOGISTICS.

Within 30 days after this decision is served, the applicant must establish that it is in full compliance with the statute and the insurance regulations by having amended filings on prescribed FMCSA forms (BMC91 or 91X or 82 for bodily injury and property damage liability, BMC 34 or 83 for cargo liability, or a BMC 84 or 85 for broker security and BOC-3 for designation of agents upon whom process may be served) submitted on its behalf. Copies of Form MCS-90 or other "certificates of insurance" are not acceptable evidence of insurance compliance. Insurance and BOC-3 filings should be sent to Federal Motor Carrier Safety Administration, 1200 New Jersey Ave., S.E., Washington, DC 20590.

The applicant is notified that failure to comply with the ferms of this decision shall result in revocation of its operating rights registration, effective 30 days from the service date of this decision.

To verify that the applicant is in full compliance, call (202)358-7000 or visit our web site at: http://li-public.fmcsa.dot.gov. Any other questions regarding the action taken should be directed to (202)366-9805.

Decided: January 31, 2020 By the Federal Motor Cariler Safety Administration

Alfry L. Sten +

Jeffrey L. Secrist, Chief Information Technology Operations Division NCA



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)	
6/27/2024	

MEGACOR-01

					-	6/	27/2024
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.							
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).							
PRODUCER License # 0G98514			CONTACT Briann	a Parker			
Avalon Risk Management Insurance Agency	LLC		PHONE (A/C, No, Ext): (650)		FAX	(650)	898-1503
C/O Los Angeles 21250 Hawthorne Blvd., Suite 160-H				estern@aval	onrisk.com	(000)	
Torrance, CA 90503		-	E-MAIL ADDRESS: ARMwestern@avalonrisk.com				
			INSURER(S) AFFORDING COVERAGE				NAIC #
WOUDED					a General insurance		10000
INSURED		F	INSURER B :				
The Block Logistics, Inc.		F	INSURER C :				
533 Airport Blvd., Suite 506 Burlingame, CA 94010		-	INSURER D :				
		-	INSURER E :				
			INSURER F :				
COVERAGES CERTIF		E NUMBER:			REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES (INDICATED. NOTWITHSTANDING ANY REQU CERTIFICATE MAY BE ISSUED OR MAY PEI EXCLUSIONS AND CONDITIONS OF SUCH POL	JIREM RTAIN,	ENT, TERM OR CONDITION , THE INSURANCE AFFORD	I OF ANY CONTR DED BY THE POL	ACT OR OTHE	R DOCUMENT WITH RESP	ЕСТ ТО	WHICH THIS
INSR TYPE OF INSURANCE ADD		POLICY NUMBER	POLICY EFF (MM/DD/YYY)	POLICY EXP	LIMI	rs	
A X COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE	\$	1,000,000
CLAIMS-MADE X OCCUR		PK202400025820	7/1/2024	7/1/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
							5,000
					MED EXP (Any one person)	\$	1,000,000
					PERSONAL & ADV INJURY	\$	2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000
					PRODUCTS - COMP/OP AGG	\$	
					COMBINED SINGLE LIMIT	\$	1,000,000
		BK20240005020	7/4/0004	7/4/0005	(Ea accident)	\$	
ANY AUTO		PK202400025820	7/1/2024	7/1/2025	BODILY INJURY (Per person)	\$	
OWNED SCHEDULED AUTOS ONLY AUTOS					BODILY INJURY (Per accident)	\$	
X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$	
	_					\$	1 000 000
A X UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$	4,000,000
EXCESS LIAB CLAIMS-MADE		UM202400009244	7/1/2024	7/1/2025	AGGREGATE	\$	4,000,000
DED X RETENTION \$ 10,000						\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER OTH- STATUTE ER		
	Δ				E.L. EACH ACCIDENT	\$	
(Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$	
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT		
A Cargo Legal Liab		AR2024FFP01844	7/1/2024	7/1/2025	For BOL Ded \$2,500		100,000
A Cont Mtr Trk Cargo		AR2024FFP01844	7/1/2024	7/1/2025	Deductible \$5,000		100,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)							
DEGONITION OF OF ENATIONS / LOCATIONS / VEHICLES (ACOND 101, Additional Remarks Schedule, may be attached it more space is required)							
CERTIFICATE HOLDER CANCELLATION							

CERTIFICATE HOLDER	
INSURED'S COPY	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

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