



## APPROVAL OUTSIDE VENDOR (NON-CUSD) CONTRACT

*All contracts must be approved by the Board of Education*

Please return this signed cover sheet and the contract to the Business Office for review  
**at least fourteen (14) working days prior to the next Board meeting.**

Once received and approved by the Business Office, **the contract will be returned to the requesting department and you must agendize the item for approval by the Board of Education** at their next regularly scheduled meeting.

**Site/Department:** Technology (IT) & Student Services

**Date(s) of Contracted Service:** 07/01/2020 - 06/30/2021

**Contractor Name:** Virtru

**Cost (not to exceed):** \$5,800.00

**Description of Service:** Email encryption to keep student records confidential

**Contract Terms:** Prepayment Penalty: ☐ Yes ☒ No Auto Renewal: ☐ Yes ☒ No

☐ Venue for Legal Disputes Reviewed by Cabinet Member ☐ Legal Counsel Reviewed

☐ Pupil Records Rider ☒ New Vendor (if checked, need W9) ☐ Other \_\_\_\_\_

☐ Fingerprinting/TB Questionnaire completed ☐ Insurance Received

☐ Ratified, reason \_\_\_\_\_

**Funding Source:** ☒ District ☐ ASB ☐ PTO/PTA ☐ Other Pending 20-21 budget approval

☐ Fund 40 ☐ Fund 14 ☒ Fund 01 **Budget Source** 01-0000-0-0000-2420-5811-00-029-0108-0028

***I have read and understand the terms of and approve the attached contract:***

Paul G Behan  
Site/Department Administrator Signature

06/04/2020  
Date

☒ Reviewed by C.B.O. before being agendized. yp  
initials

Board Approval Date: \_\_\_\_\_

☐ Copy sent to the Site/Department \_\_\_\_\_  
Date

## 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.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

**Virtu Corporation**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► \_\_\_\_\_

**Note:** 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 **not** 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.

☐ 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 FATCA reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

**1130 Connecticut Avenue, NW; Suite 210**

6 City, state, and ZIP code

**Washington, DC 20036**

Requester's name and address (optional)

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.

**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.

Social security number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

or

Employer identification number

4 5 - 4 2 6 7 6 0 2

### 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 ► **January 2, 2020**

### 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.

**QUOTE**

Virtru Corporation  
sales@virtru.com

**Carmel Unified School District**

8460 Carmel Valley Rd.  
Carmel-by-the-Sea, California  
93923

**Quote Number:**

Q009460

**Valid Until:**

09/30/2020

**Contract Term (Months):**

12

PRODUCT	PRODUCT DESCRIPTION	LIST PRICE PER UNIT	DISCOUNT %	QUANTITY	SUB-TOTAL
Enterprise - Virtru Data Protection Platform	Access Control Manager, Key Management, DLP, Dashboard, HIPAA Rule pack, BAA, Data Protection Toolkit, Custom Message Template, Account Manager, Quarterly Support, Annual Business Reviews. P1 Response within 2 hours.	1124.25	62.51%	1	\$1,124.25
Enterprise - Data Protection Gateway (Hosted), Endpoint Email Protection	Policy-based, server-level protection. Hosted by Virtru. Endpoint Email Protection for Gmail, and Outlook. Virtru Email Protection app for iOS and Android.	60.00	0%	75	\$4,500.00
				<b>Annual Invoice Amount:</b>	<b>\$5,624.25</b>
				<b>Total Contract Amount:</b>	<b>\$5,624.25</b>

**Contract Effective Date:**

07/01/2020

**Currency:**

USD

**Payment Term:**

Net 30

**QUOTE**

Virtru Corporation  
sales@virtru.com

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**SPECIAL TERMS & NOTES**

Virtru Representative:  
Seydou Quansah  
squansah@virtru.com

*Agreement*

*This Order Form is part of the Virtru Pro Subscription Agreement (this “Agreement”), entered into as of the date first set forth above (the “Effective Date”), by and among Virtru Corporation, a Delaware corporation (“Virtru”), and the customer identified above (“Customer”). This Agreement includes and is subject to the terms and conditions set forth: <https://www.virtru.com/terms-of-service> (collectively, the “Terms and Conditions”).*

*By executing this Order Form, each signatory hereby represents and warrants that such signatory is a duly authorized representative of Customer and, on behalf of Customer, agrees that, as of the Effective Date, Customer’s use of the Materials and Virtru Pro Services (as defined in the Terms and Conditions) shall be governed by this Agreement, including the Terms and Conditions.*

**SIGNATURES****Customer:**

By:  
Name:  
Title:  
Date:

