

**AFFILIATE CERTIFICATION OF FEDERAL AND STATE PAYROLL TAX COMPLIANCE**

I hereby certify to New Beginnings Enterprises, Inc. that the affiliate named below

PLEASE CHECK ONE:  Is in compliance  
 Is not in compliance

with all Federal and State requirements for depositing and reporting of all payroll taxes (federal FICA & federal income tax withholding; federal unemployment tax, if applicable, state income tax withholding; and state unemployment tax).

IF NOT IN COMPLIANCE, explain the reason(s) for noncompliance and the corrective action being taken:

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Name of Affiliate \_\_\_\_\_

By: (MUST BE SIGNED BY CHIEF EXECUTIVE OFFICER)

\_\_\_\_\_  
(Print Name and Title)

\_\_\_\_\_  
(Signature)

Date \_\_\_\_\_