

## Sponsorship and Exhibitor Agreement

(Terms, Conditions, and Purposes)

## 2025 Practical Recommendations in Immuno & Molecular Oncology (PRIMO) Meeting

**Location:** 'Alohilani Resort Waikiki Beach | 2490 Kalākaua Ave, Honolulu, HI 96815

**Dates:** Wednesday, February 5- Saturday, February 8, 2025

Agreement between PRIMO Education, LLC (“Provider”) and \_\_\_\_\_  
 \_\_\_\_\_ (“Exhibiting Company”).

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

## Level of Sponsorship

Please check box to indicate level of sponsorship:

- ☐ \$50,000 for **ELITE PLUS** Package
  - ☐ \$40,000 for **ELITE** Package
  - ☐ \$30,000 for **PREMIER** Package
  - ☐ \$15,000 for **CHAMPION** Package
  - ☐ \$10,000 for **EXHIBIT** Only\*
- Two representatives per tabletop display are included in the exhibit fee.*

## On-Site Representatives

### ELITE PLUS, ELITE, PREMIER, CHAMPION AND EXHIBITOR:

On-Site Rep #1 Name: \_\_\_\_\_ Email: \_\_\_\_\_

On-Site Rep #2 Name: \_\_\_\_\_ Email: \_\_\_\_\_

### ELITE PLUS, ELITE, PREMIER AND CHAMPION:

On-Site Rep #3 Name: \_\_\_\_\_ Email: \_\_\_\_\_

### ELITE PLUS, ELITE AND PREMIER:

On-Site Rep #4 Name: \_\_\_\_\_ Email: \_\_\_\_\_

### ELITE PLUS AND ELITE:

On-Site Rep #5 Name: \_\_\_\_\_ Email: \_\_\_\_\_

On-Site Rep #6 Name: \_\_\_\_\_ Email: \_\_\_\_\_

### ELITE PLUS ONLY:

On-Site Rep #7 Name: \_\_\_\_\_ Email: \_\_\_\_\_

On-Site Rep #8 Name: \_\_\_\_\_ Email: \_\_\_\_\_

## A La Carte Options (Subject to availability)

- ☐ **Branded insulated tumbler | \$15,000**  
There is lots to do outside in the Hawaiian heat so attendees will love a customized tumbler that can keep up!
- ☐ **Think Tank at PRIMO | \$10,000**  
1-hour session with up to 15 attendees. PRIMO is responsible for the basic A/V setup and Food & Beverage. Sponsor is responsible for sign-in sheet, honoraria (if needed), and signage.
- ☐ **Branded water stations with disposable cups | \$5,000**  
Hawaii is hot! Sponsor the water station for attendees to cool off and refresh in between meeting sessions. Subject to availability at venue.
- ☐ **Video or logo looping on Exhibit Hall monitors | \$3,000**  
Your logo or short video of your choice to loop in the Exhibit Hall
- ☐ **Polling questions asked during breaks | \$2,500**  
Submit 2 questions that will be asked of the conference attendees during breaks. Limit: 2 per day
- ☐ **Banner, clings, or signage based on availability. | \$1,500**  
Standard signage is 8' x 8'. Oversized signage is an additional cost. Sponsor to provide signage.
- ☐ **Tickets to Sunset Mingle | Prior to meeting \$150/ticket | On-site \$200/ticket**
- ☐ **Tickets to Women in Oncology Award Dinner and Reception**  
Prior to meeting \$150/ticket | On-site \$200/ticket



## Payment Information

Total Sponsorship Amount: \$ \_\_\_\_\_

**CHECK:** Please make check payable to:

PRIMO Education, LLC, PO Box 592, Morristown, NJ 07960

LLC: Federal ID 81-1394718

**CREDIT CARD:** A small processing fee (~3%) will be added to all credit card payments. An invoice will be sent to the email address listed below.

**INVOICE:** Please indicate specifics needed for invoice below.

Name of Exhibiting Company: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

PO#: \_\_\_\_\_

## Payment Terms

Full payment is required within 30 business days after the execution of the contract. Space will not be held until payment is received.

Your signature on this agreement creates a legally binding contract between PRIMO Education and your company. In the event your company chooses to cancel this sponsorship, you are still required to pay the sponsorship fee.

If you have any questions, please email Janine Koch at [jkoch@primomeeting.org](mailto:jkoch@primomeeting.org).

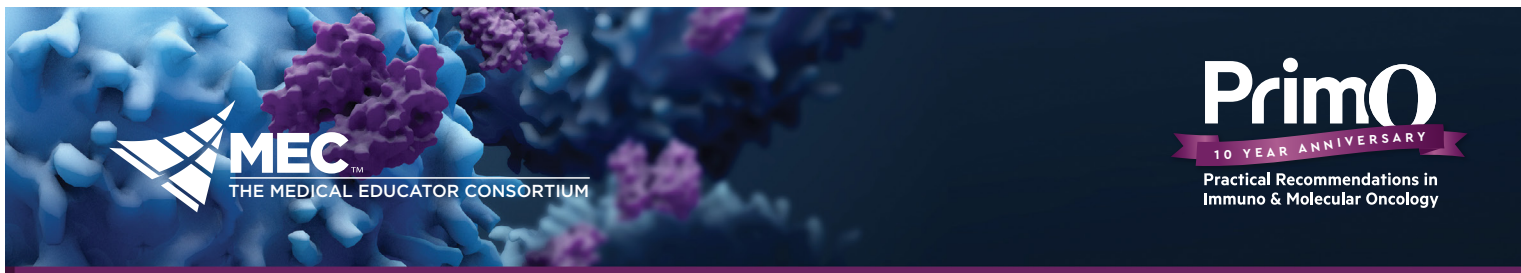
Exhibiting Company Designee Name (Print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

PRIMO/Designee Name (Print) JANINE KOCH

Signature Janine Koch Date 1/1/2024

\*Exhibit Only: The 3-day tabletop display fee shall be separate and distinct from educational grants (ie, grants are not considered exhibit fees). Two representatives per tabletop display are included in the exhibit fee.



The purpose of the display is to allow companies an opportunity to complement the scientific or educational sessions by informing and educating the course participants on the latest developments in equipment, supplies and services that are available. MEC strictly adheres to the Accreditation Council on Continuing Medical Education (ACCME) Standards for Integrity and Independence in Accredited Continuing Education regarding exhibits, which state: Standard 5: Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education. Accredited providers are responsible for ensuring that education is separate from marketing by ineligible companies—including advertising, sales, exhibits, and promotion—and from non-accredited education offered in conjunction with accredited continuing education. 1. Arrangements to allow ineligible companies to market or exhibit in association with accredited education must not: a. Influence any decisions related to the planning, delivery, and evaluation of the education. b. Interfere with the presentation of the education. c. Be a condition of the provision of financial or in-kind support from ineligible companies for the education. 2. The accredited provider must ensure that learners can easily distinguish between accredited education and other activities. a. Live continuing education activities: Marketing, exhibits, and non-accredited education developed by or with influence from an ineligible company or with planners or faculty with unmitigated financial relationships must not occur in the educational space within 30 minutes before or after an accredited education activity. Activities that are part of the event but are not accredited for continuing education must be clearly labeled and communicated as such. b. Print, online, or digital continuing education activities:

Learners must not be presented with marketing while engaged in the accredited education activity. Learners must be able to engage with the accredited education without having to click through, watch, listen to, or be presented with product promotion or product-specific advertisement. c. Educational materials that are part of accredited education (such as slides, abstracts, handouts, evaluation mechanisms, or disclosure information) must not contain any marketing produced by or for an ineligible company, including corporate or product logos, trade names, or product group messages. d. Information distributed about accredited education that does not include educational content, such as schedules and logistical information, may include marketing by or for an ineligible company. 3. Ineligible companies may not provide access to, or distribute, accredited education to learners. Exhibitors must comply with the ACCME Standards for Integrity and Independence in Accredited Continuing Education established by the Accreditation Council on Continuing Medical Education ([www.accme.org](http://www.accme.org)), the American Medical Association's Ethical Opinion on Continuing Medical Education and Gifts to Physicians ([www.ama-assn.org](http://www.ama-assn.org)), the Food and Drug Administration regulations regarding industry-supported scientific and educational activities ([www.fda.org](http://www.fda.org)), and the PhRMA Code on Interactions with Healthcare Professionals ([www.PhrMA.org](http://www.PhrMA.org)).

MEC will monitor exhibitor displays, products, "giveaways," and conduct for compliance with MEC and ACCME policies. MEC requires that all exhibitors be in compliance with FDA regulations regarding all products or devices regulated by the FDA. Any mention of product names that are accompanied by information on usage and indications is considered advertising and subject to applicable FDA guidelines. Exhibitors must also comply with the FDA restrictions on the promotion of investigational and pre-approved drugs, devices, materials and/or products, and of approved drugs, devices, materials, and/or products for unapproved uses. Information and guidance may be obtained from the FDA's website [www.fda.gov](http://www.fda.gov).



**Request for Taxpayer  
Identification Number and Certification**

Go to [www.irs.gov/FormW9](http://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.)

**Primo Education LLC**

**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.

- ☐ Individual/sole proprietor    ☐ C corporation    ☐ S corporation    ☐ Partnership    ☐ Trust/estate  
☒ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) S  
**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.  
☐ 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) \_\_\_\_\_

(Applies to accounts maintained outside the United States.)

**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 ☐

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

Requester's name and address (optional)

**P.O. Box 592**

**6** City, state, and ZIP code

**Morristown, NJ 07963**

**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. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

**Social security number**

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or

**Employer identification number**

8	1	-	1	3	9	4	7	1	8
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**Part II Certification**

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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

*Kathy Marshall*

Date

01/01/2024

**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).

**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