Form W-8BEN

(Rev. October 2021)

Department of the Treasury Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

• For use by individuals. Entities must use Form W-8BEN-E.

- \bullet Go to $\underline{www.irs.gov/FormW8BEN}$ for instructions and the latest information.
- Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NOT use this form if:		Instead, use Form:
• You are NOT an individual	BEN-E	,
• You are a U.S. citizen or other U.S. person, including a resident alien indi	vidual W-9	ı
• You are a beneficial owner claiming that income is effectively connected than personal services)	with the conduct of trade or business	ss within the United States (other
• You are a beneficial owner who is receiving compensation for personal se	rvices performed in the United Stat	tes 8233 or W-4
• You are a person acting as an intermediary	-	
Note: If you are resident in a FATCA partne		
Part I Identification of Beneficial Owner (see instruct	ions)	
1 Name of individual who is the beneficial owner address	2 Country of citizenship city	
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use account_list	a P.O. box or in-care-of address.	
City or town, state or province. Include postal code where appropriate. address	Country city	
4 Mailing address (if different from above) account_list		
City or town, state or province. Include postal code where appropriate. address	Country city	
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions) account_list)	
6a Foreign tax identifying number (see instructions) address	6b Check if FTIN not legall	y required
7 Reference number(s) (see instructions) address	8 Date of birth (MM-DD-Y address	YYY) (see instructions)
Part II Claim of Tax Treaty Benefits (for chapter 3 pur	poses only) (see instruction	ons)
9 I certify that the beneficial owner is a resident of null within the meaning of the	income tax treaty between the United	States and that country.
10 Special rates and conditions s (if applicable—see instructions): The beneficia treaty identified on line 9 above to claim a <u>null</u> % rate of withholding on (specify null		article and paragraph <u>null</u> of the
Explain the additional conditions in the Article and paragraph the beneficial owner null	meets to be eligible for the rate of with	hholding: <u>null</u>
Part II Certification		
Under penalties of perjury, I declare that I have examined the information on this for complete. I further certify under penalties of perjury that:	orm and to the best of my knowledge a	and belief it is true, correct, and
• I am the individual that is the beneficial owner (or am authorized to sign for the i which this form relates or am using this form to document myself for chapter 4 pur		of all the income or proceeds to
• The person named on line 1 of this form is not a U.S. person;		
• This form relates to:		
(a) income not effectively connected with the conduct of a trade or business in the	e United States;	
(b) income effectively connected with the conduct of a trade or business in the Un	nited States but is not subject to tax un	der an applicable income tax treaty;
(c) the partner's share of a partnership's effectively connected taxable income; or		
(d) the partner's amount realized from the transfer of a partnership interest subject	et to withholding under section 1446(f)	;
• The person named on line 1 of this form is a resident of the treaty country listed of between the United States and that country; and	on line 9 of the form (if any) within the	e meaning of the income tax treaty
• For broker transactions or barter exchanges, the beneficial owner is an exempt fo	reign person as defined in the instructi	ons.
Furthermore, I authorize this form to be provided to any withholding agent that has owner or any withholding agent that can disburse or make payments of the income form within 30 days if any certification made on this form becomes incorrect.		
I certify that I have the capacity to sign for the	person identified on line 1 of this form	1.
Sign Here null	-	null
Signature of beneficial owner (or individual authorized to signature of beneficial owner)	gn for beneficial owner)	Date (MM-DD-YYYY)
null	· 	
Print name of signer		