Form W-8BEN

(Rev. July 2017)

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.

- Go to 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

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• You	are NOT an i	ndividual			W-8BEN-E	
• You	are a U.S. cit	tizen or other U.S. person, including a resid	dent alien individual		W-9	
		cial owner claiming that income is effective anal services)	•	of trade or business	within the U.S.	
• You	are a benefic	cial owner who is receiving compensation f	or personal services performed	in the United State	s 8233 or W-4	
• You	are a person	acting as an intermediary			W-8IMY	
Note:	If you are res	sident in a FATCA partner jurisdiction (i.e., risdiction of residence.				
Par	t I der	ntification of Beneficial Owner (s	see instructions)			
1		Name of individual who is the beneficial owner		2 Country of citizenship		
3	Permanent	residence address (street, apt. or suite no	., or rural route). Do not use a l	P.O. box or in-care	o-of address.	
	City or tow	n, state or province. Include postal code w	here appropriate.		Country	
4	Mailing add	lress (if different from above)				
	City or tow	n, state or province. Include postal code w	here appropriate.		Country	
5	II C taypa	yer identification number (SSN or ITIN), if re	oquired (see instructions)	6 Foreign tay	identifying number (see instructions)	
3	U.S. taxpa	yer identification number (33N or 111N), if N	equired (see instructions)	• Foreign tax	identifying number (see instructions)	
7	Reference r	number(s) (see instructions)	8 Date of birth (MM-DD)-YYYY) (see instrud	etions)	
•	110101011001		Date of birth (Min BB	7 1 1 1 7 (000 mondo	violis,	
Par	t II Clai	im of Tax Treaty Benefits (for cha	apter 3 purposes only) (se	ee instructions)		
9	I certify tha	t the beneficial owner is a resident of		-	within the meaning of the income tax	
	treaty betw	treaty between the United States and that country.				
10	Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph					
	of the treaty identified on line 9 above to claim a % rate of withholding on (specify type of income):					
	Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding:					
Part	III Cer	tification				
		rjury, I declare that I have examined the informat	ion on this form and to the best of n	nv knowledge and beli	ef it is true, correct, and complete. I further	
		s of perjury that:		.,		
	I am the indi	vidual that is the beneficial owner (or am authori:	zed to sign for the individual that is t	the beneficial owner) o	f all the income to which this form relates or	
	I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself for chapter 4 purposes,					
•	The person named on line 1 of this form is not a U.S. person,					
•	The income to which this form relates is:					
	(a) not effectively connected with the conduct of a trade or business in the United States,					
	(b) effectively connected but is not subject to tax under an applicable income tax treaty, or					
	(c) the partner's share of a partnership's effectively connected income,					
•	The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and					
•	• For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.					
	any withhold	, I authorize this form to be provided to any with ling agent that can disburse or make payments o cation made on this form becomes incorrect.	of the income of which I am the bene			
Sign	Here					
	,	Signature of beneficial owner (or indiv	vidual authorized to sign for benefic	ial owner)	Date (MM-DD-YYYY)	
		Print name of signer		O		
		Print name of signer		Capacity in which act	ing (if form is not signed by beneficial owner)	