(Rev. October 2021) States Ta		States Tax Withholdin	of Foreign Status of Beneficial Owner for United Tax Withholding and Reporting (Individuals) use by individuals. Entities must use Form W-8BEN-E. hirs.gov/FormW8BEN for instructions and the latest information.			OMB No. 1545-1621
Department Internal Rev	t of the Treasury venue Service	 Give this form to the withholding agent or payer. Do not send to the IRS. 				
Do NOT	use this form if:					Instead, use Form:
	e NOT an individu					W-8BEN-E
You are	a U.S. citizen or	other U.S. person, including a resident alien	individual			W-9
	e a beneficial owr han personal ser	ner claiming that income is effectively connectively connectively connectively connectively connectively connec			within the Unit	ted States
You are	e a beneficial owr	ner who is receiving compensation for person	al services performed i	n the United States		8233 or W-4
You are	e a person acting	as an intermediary				W-8IMY
		in a FATCA partner jurisdiction (that is, a Mc ion of residence.	odel 1 IGA jurisdiction	with reciprocity), ce	ertain tax acco	ount information may be
Part I	Identifica	ation of Beneficial Owner (see instr	uctions)			
1 N	lame of individua	I who is the beneficial owner	,	2 Country of c	itizenship	
3 P	ermanent resider	nce address (street, apt. or suite no., or rural i	route) Do not use a P	0 box or in-care-	of address	
0					01 2001 033.	
C	ity or town, state	e or province. Include postal code where appr	ropriate.		Country	
4 N	1ailing address (if	different from above)				
C	ity or town, state	or province. Include postal code where appr	ropriate.		Country	
5 U	J.S. taxpayer ider	ntification number (SSN or ITIN), if required (s	ee instructions)			
6a F	oreign tax identif	ring number (see instructions) 6b Check if FTIN not legally required				
7 R	eference numbe	(s) (see instructions) 8 Date of birth (MM-DD-YYYY) (see instructions)				
Part II	Claim of	Tax Treaty Benefits (for chapter 3 p	ourposes only) (see	e instructions)		
					within the meaning of the income tax	
10 S	pecial rates and	e United States and that country. d conditions (if applicable—see instructions): of the treaty identified on line 9	above to claim a	% rate of withhole	ding on (speci	fy type of income):
E	xplain the addition	onal conditions in the Article and paragraph th	ne beneficial owner me	ets to be eligible for	r the rate of wi	ithholding:
Part III	Certifica	tion				
Jnder penalt	ties of perjury, I declare	that I have examined the information on this form and to the b	pest of my knowledge and belie	f it is true, correct, and cor	mplete. I further cert	tify under penalties of perjury that:
		he beneficial owner (or am authorized to sign for the n to document myself for chapter 4 purposes;	individual that is the bene	ficial owner) of all the i	income or proce	eds to which this form
The pers	son named on line	1 of this form is not a U.S. person;				
	n relates to:					
. ,		onnected with the conduct of a trade or business in ected with the conduct of a trade or business in the		ubiaat ta tay undar an	applicable inco	ma tay tractu
. ,	-	partnership's effectively connected taxable income;		ubject to tax under an		me tax treaty,
		alized from the transfer of a partnership interest subj		section 1446(f);		
The perso	on named on line 1 of t	his form is a resident of the treaty country listed on line 9 of t	the form (if any) within the mean	ning of the income tax trea	aty between the Un	ited States and that country; and
		parter exchanges, the beneficial owner is an exempt	0 1		C · 1	
		to be provided to any withholding agent that has control, e income of which I am the beneficial owner. I agree that				
Sian U		certify that I have the capacity to sign for the person	identified on line 1 of this	form.		
Sign He						

Signature of beneficial owner (or individual authorized to sign for beneficial owner)

Date (MM-DD-YYYY)

Print name of signer