## Form W-8BEN-E

(Rev. October 2021) Substitute Form for

**Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entitles)** 

► For use by entities. Individuals must use Form W-8BEN. ► Section references are to the Internal Revenue Code.

► Go to www.irs.gov/FormW8BENE for instructions and the latest information.



Date (MM-DD-YYYY)

Non-FATCA	Payments	► Give this f	orm to the withholding agent or payer. Do not s	send to the IRS.			
Do NOT us	se this form for:				•	Instead use Form:	
U.S. entity or U.S. citizen or resident  W-  A finite in this is a second							
• A foreign individual							
	A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the United States (unless claiming treaty benefits)						
	roreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession						
	iming that income is effectively connected U.S. income or that is claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b)						
			าร)				
			liary acting as a qualified derivatives dealer	r)		W-8IMY	
Part		cation of Beneficial Owner		0 0			
1 Na	me or organizatio	on that is the beneficial owner		2 Counti	ry of incorporation or or	ganization	
	. ,	ntity type) (Must check one box only	•		☐ Partnership		
	Simple trust	☐ Tax-exempt or	ganization   Complex trust		•	ment – Controlled Entity	
	Central Bank o	f Issue 🔲 Private founda	tion   Estate		☐ Foreign Governr	ment – Integral Part	
	Grantor Trust	☐ Disregarded ei	•	•			
	If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "Yes," complete part III.						
6 Permanent residence address (street, apt. or suite no., or rural route). <b>Do not use a P.O. box or in-care-of address</b> (other than a registered address).							
City	y or town, state o	r province. Include postal code whe	re appropriate.		Country		
					<u> </u>		
7 Ma	illing address (if d	lifferent from above)					
O:t-	City or town, state or province. Include postal code where appropriate.  Country						
City	y or town, state o	r province. Include postal code whe	re appropriate.		Country		
0 110	tovnovor identif	fination number (TINI) if required	9b Foreign TIN				
8 U.S	s. taxpayer identi	fication number (TIN), if required	9b Foreign Tilv		9c Check if FTIN no	ot legally required▶□	
Dont	III Oleim	-		I \	<u> </u>		
Part	ertify that (check a		cable). (For chapter 3 purposes or	niy.)			
	-						
a ∟		owner is a resident of nited States and that country.			within the meaning	of the income tax treaty	
<b>b</b> [	treaty provision dealing with limitation on benefits. The following are types of limitation on benefits provisions that may be included in an applicable tax treaty (check only one; see instructions):  Government  Tax-exempt pension trust or pension fund  Other tax-exempt organization  Company that meets the ownership and base erosion test  Company that meets the derivative benefits test  Company with an item of income that meets active trade or business test						
	c The beneficial owner is claiming treaty benefits for U.S. source dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation and meets qualified resident status (see instructions).						
	,						
of	The beneficial owner is claiming the provisions of Article and paragraph % rate of withholding on (specify type of income):						
F:	Explain the additional conditions in the Article the beneficial owner meets to be eligible for the rate of withholding:						
Part X	XX Certific	ation					
Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under							
Further any wit	purposes, or is subr The entity identified This form relates to trade or business in (d) the partner's am For broker transacti rmore, I authorize th tholding agent that	mitting this form for purposes of section of on line 1 of this form is not a U.S. person (a) income not effectively connected with the United States but is not subject to to count realized from the transfer of a partitions or barter exchanges, the beneficial on is form to be provided to any withholding can disburse or make payments of the incomplete in		United States, (ker's share of a par section 1446(f) ed in the instruct	b) income effectively conne artnership's effectively conr ); and tions.	octed with the conduct of a nected taxable income, or	
_			y identified on line 1 of this form.				
	,	. , ,					
Sign	Here						

Print Name

Signature of individual authorized to sign for beneficial owner