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.

► 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

Do NO	DT use this form if:			Instead, use Form:	
• You are NOT an individual					
• You are a U.S. citizen or other U.S. person, including a resident alien individual					
	are a beneficial owner claiming that income is effectively conne er than personal services)	ected with the conduct o	f trade or business	within the United States	
• You	are a beneficial owner who is receiving compensation for perso	onal services performed	in the United States	s 8233 or W-4	
• You are a person acting as an intermediary					
	If you are resident in a FATCA partner jurisdiction (that is, a Need to your jurisdiction of residence.	Model 1 IGA jurisdiction	with reciprocity), c	ertain tax account information may be	
Par	Identification of Beneficial Owner (see ins	tructions)			
1	Name of individual who is the beneficial owner	ficial owner 2 Country of		citizenship	
3	ermanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.				
5 Fermanent residence address (street, apt. or suite no., or rural route). Do not use a F.O. box or in-care-or address.					
	City or town, state or province. Include postal code where appropriate.			Country	
4 Mailing address (if different from above)					
	City or town, state or province. Include postal code where appropriate.			Country	
5	U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)				
6a	Foreign tax identifying number (see instructions)	6b Check if FTIN not legally required			
7	7 Reference number(s) (see instructions) 8 Date of birth (MM-DD-YYYY) (see instructions)				
Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)					
9 I certify that the beneficial owner is a resident of within the meaning of the income tax					
10					
	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	■ Certification				
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 penalties of perjury that:					
• 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 or proceeds 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;					
• This form relates to:					
(a) income not effectively connected with the conduct of a trade or business in the United States;					
(b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under 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 to withholding under section 1446(f);					
 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. 					
Furtherr	nore, I authorize this form to be provided to any withholding agent that has contre e or make payments of the income of which I am the beneficial owner. I agree th	rol, receipt, or custody of the in-	come of which I am the b		
Sign	I certify that I have the capacity to sign for the pers	on identified on line 1 of this	form.		
	Signature of beneficial owner (or individual au	thorized to sign for beneficia	al owner)	Date (MM-DD-YYYY)	
	Print name of signer				
	Time hame or signer				