Form W-8BEN

(Rev. February 2018)
Department of the treasury
Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding

Section references are to the Internal Revenue Code. $^{\rm -}$ See separate instructions.

Give this form to the withholding agent or payer . Do not send to the IRS .

OMB No. 1545-1621

Do not use this form for: ? A U.S. citizen or other U.S. person, inclu				Instead, use Form: W-9
 ? A person claiming that income is effective of a trade or business in the United State ? A foreign partnership, a foreign simple tr ? A foreign government, international orgation foreign private foundation, or government Claiming the applicability of section(s) 11 5 	e's rust, or a foreign grantor trust nization, foreign central bank at of a U.S. possession that r	t (see instructions for issue, foreign to received effectively	or exceptions) ax-exempt organizationnected income	ation,
Note: These entities should use Form W-8 to claim they are a foreign person exempt A person acting as an intermediary	BBEN if they are claiming trea from backup withholding?.	aty benefits or are p	providing the form o	·
	ficial Owner (See instruc	rtions)		_
1 Name of individual or organization that is	yworio.		2 Country of incorporation or organization	
3 Type of beneficial owner:	Individual	Corporation	Disregarded enti	ty Partnership Simple trust
Central bank of issue	Complex trust Tax-exempt organization	Estate Private foundation	Government	International organization
4 Permanent residence addresses (str	eet, apt. or suite no., or rural	route). Do not use	a P.O. Box or in-	care-of address.
City or town, state or province. Include	oriate.		Country (do not abbreviate)	
5 Mailing address (if different from abo	ove)	,		
City or town, state or province. Include	oriate.		Country (do not abbreviate)	
6 U.S. taxpayer identification number,	· ` ` ′	N or ITIN EIN	7 Foreign tax	x identifying number, if any (optional)
8 Reference number(s) (see instruction	ns)			
Part II Identification of Benef			Day time a talanda	and four name on
_9 Profession	Email address		Day time telepho	one and fax number
Date of birth	Mother's maiden name	_	Passport number	
_10 Name of bank(s) : (U.S.A BANK ONL	k)	Branch address		
Account Name and Account Number		Date account was opened		
Name of bank(s): (U.S.A INVESTMENT BANK ONLY) 2		- Branch address		
Account Name and Account Number		_ Date account was opened		
_11 Investment(s) / Stock Options		Names at least three(3) stock held/ Names of Shares		
_12 Annuities/ Insurance		Company Name / Policy Number		
13 Property(ies) Portfolio		Property(ies) Address		

Property (ies) Management	Property (ies) Agent /Phone number / E-mail			

Part III Notional Principal Contracts

14 LI have provided or will provide a statement that identifies those notional principal contracts from which the income is **not** effectively connected with the conduct of a trade or business in the United States. I agree to update this statement as required.

Part IV 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:

- 1 I am the beneficial owner (or am authorized to sign for the beneficial owner) of all the inc one to which this form relates,
- 2 The beneficial owner is not a U.S. person,
- 4 For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.
- Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner.

Sign Here

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

Date (MM-DD-YYYY) Capacity in which acting

FAX TO: +1 855 754 1140