orm W-8BEN

(Rev. February 2006)

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

OMB No. 1545-1621

Department of the Treasury Internal Revenue Service	 Section references are to the Internal Revenue Code. ▶ See separate instru ▶ Give this form to the withholding agent or payer. Do not send to the IRS 	
Do not use this form for:	antivernous of VIII VIII II II II	Instead, use Form:
	U.S. person, including a resident alien individual	W-9
	t income is effectively connected with the conduct	
of a trade or business	in the United States	W-8ECI
 A foreign partnership, 	a foreign simple trust, or a foreign grantor trust (see instructions for exceptions)	. W-8ECI or W-8IMY
 A foreign government 	international organization, foreign central bank of issue, foreign tax-exempt organization	n,
claiming the applicable	tion, or government of a U.S. possession that received effectively connected income or lity of section(s) 115(2), 501(c), 892, 895, or 1443(b) (see instructions)	
Note: These entities sho	uld use Form W-8BEN if they are claiming treaty benefits or are providing the form only	to
claim they are a foreign	person exempt from backup withholding.	
 A person acting as ar 	·	W-8IMY
Note: See instructions for	or additional exceptions.	
Part I Identifi	cation of Beneficial Owner (See instructions.)	
1 Name of individua	or organization that is the beneficial owner 2 Count	ry of incorporation or organization
Corpora	tion or Individual Name Here (or	N/A for Individual
3 Type of beneficial		Partnership Simple trust
Grantor trust		International organization
Central bank of		
	nce address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-	of address
Fermanent resider	ice address (street, apr. of suite flo., of fural foute). Do flot aso a fire box of in oute	01 22210001
Oite au tours atot	ar province Include neetal code where appropriate	Country (do not abbreviate)
City or town, state	e or province. Include postal code where appropriate.	Country (do not abbreviate)
2		
💥 5 Mailing address (i	different from above)	
-		
City or town, state	e or province. Include postal code where appropriate.	Country (do not abbreviate)
★ 6 U.S. taxpayer ider		entifying number, if any (optional)
Required	1! (See notes) SSN or ITIN EIN	
8 Reference numbe	r(s) (see instructions)	
·		
Part II Claim	of Tax Treaty Benefits (if applicable)	
9 I certify that (che	ck all that apply):	
A STATE OF THE STA	er is a resident of within the meaning of the income tax treaty	between the United States and that country.
		is required)
	owner is not an individual, derives the item (or items) of income for which the treaty be	posite are claimed and if
c ine beneficial	eets the requirements of the treaty provision dealing with limitation on benefits (see insti	ructions)
	owner is not an individual, is claiming treaty benefits for dividends received from a fore	
	ousiness of a foreign corporation, and meets qualified resident status (see instructions).	
e The beneficial	owner is related to the person obligated to pay the income within the meaning of secti	on 267(b) or 707(b), and will file
Form 8833 if	he amount subject to withholding received during a calendar year exceeds, in the aggr	egate, \$500,000.
10 Special rates and	conditions (if applicable—see instructions): The beneficial owner is claiming the provis	ions of Articleof the
	n line 9a above to claim a% rate of withholding on (specify type of incom	
	as the beneficial owner meets the terms of the treaty article:	
Explain the reason	is the solitonal owner mode the terms of the today artists.	

Part III Notion	al Principal Contracts	
Contract Con		sh the income is not effectively
11	d or will provide a statement that identifies those notional principal contracts from which the conduct of a trade or business in the United States. I agree to update this statem	n the income is not ellectively
THE RESERVE OF THE PERSON OF T		lent as required.
Part IV Certific		plief it is true parrent and complete 1
Under penalties of perjury, further certify under penalti	I declare that I have examined the information on this form and to the best of my knowledge and be	mer it is true, correct, and complete, i
	(or am authorized to sign for the beneficial owner) of all the income to which this form relates,	
2 The beneficial owner is n	ot a U.S. person,	to the second se
3 The income to which this not subject to tax under an	form relates is (a) not effectively connected with the conduct of a trade or business in the United Si income tax treaty, or (c) the partner's share of a partnership's effectively connected income, and	.ates, (b) enectively connected but is
4 For broker transactions of	r barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.	
Furthermore, Lauthorize thi	s form to be provided to any withholding agent that has control, receipt, or custody of the income o	f 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,	
NS.	Sion & Print Nous	
Sign Here	Sign & Print Name	(VVV) Canacity in which acting

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 25047Z

Form W-8BEN (Rev. 2-2006)

