This form is for individuals. If needed for an entity please contact APSS for the appropriate form to use.

## Form W-8BEN

(Rev. February 2014)

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.

► Information about Form W-8BEN and its separate instructions is at www.irs.gov/formw8ben.

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

OMB No. 1545-1621

Do N	OT use this fo	orm if:			Instead, use Form:	
• You	are NOT an i	ndividual			W-8BEN-E	
• You	ı are a U.S. ci	tizen or other U.S. person, including a residen	t alien individual		W-9	
		cial owner claiming that income is effectively conal services)			within the U.S.	
• You	are a benefic	cial owner who is receiving compensation for p	personal services performed	in the United State	s 8233 or W-4	
		• , ,	·		W-8IMY	
_		<u> </u>				
Par 1	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			O Constant of	Country of citizenship	
	Name of individual who is the beneficial owner		2 Country of citizenship			
3	Permanent	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>				
	City or tow	wn, state or province. Include postal code where appropriate.			Country	
4	Mailing add	Mailing address (if different from above)				
	City or town, state or province. Include postal code where appropriate.				Country	
	U.S. taxpay	ver identification number (SSN or ITIN), if requ	ired (see instructions)	6 Foreign tax	identifying number (see instructions)	
					,	
7	Reference r	erence number(s) (see instructions)  8 Date of birth (MM-DD-YYYY) (see instructions)				
Par	t II Clai	im of Tax Treaty Benefits (for chapt	er 3 purposes only) (se	ee instructions)		
					e meaning of the income tax treaty	
_	•	een the United States and that country.				
10		Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article				
	of the treat	of the treaty identified on line 9 above to claim a % rate of withholding on (specify type of income):				
	Explain the	Explain the reasons the beneficial owner meets the terms of the treaty article:				
Par	t III Cer	tification				
		rjury, I declare that I have examined the information of perjury that:	on this form and to the best of r	my knowledge and beli	ef it is true, correct, and complete. I further	
•	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 to which this form relates or am using this form to document myself as an individual that is an owner or account holder of a foreign financial institution,					
•	The person named on line 1 of this form is not a U.S. person,					
•	The income to which this form relates is:					
	(a) not effect	(a) not effectively connected with the conduct of a trade or business in the United States,				
	(b) effectively connected but is not subject to tax under an applicable income tax treaty, or					
	(c) the partner's share of a partnership's effectively connected income,					
•		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 tr	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. I agree that I will submit a new form within 30 day if any certification made on this form becomes incorrect.					
Siar	n Here					
9'		Signature of beneficial owner (or individua	al authorized to sign for benefici	al owner)	Date(MM-DD-YYYY)	
		Print name of signer		Capacity in which act	ing (if form is not signed by beneficial owner)	
				Supusity in Willon act	ing (ii form is not signed by beneficial owner)	