UID: 55887524

Form W-8BEN

(Rev. July 2017)

Department of the Treasury

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.

Electronic Substitute Form W-8BFN

Internal	Revenue Service	► Give this form to the with	nholding agent or payer. Do	not send to the IF	₹S.	I Sim W SBER
Do NC	OT use this for	rm if:				Instead, use Form
• You	are NOT an inc	dividual				W-8BEN-E
You	are a U.S. citiz	en or other U.S. person, including a residen	t alien individual			W-9
	are a beneficia er than persona	al owner claiming that income is effectively cal services)	onnected with the conduct of		within the U.S	W-8ECI
You	are a beneficia	al owner who is receiving compensation for p	personal services performed in	the United States		8233 or W-4
		cting as an intermediary	·			
		dent in a FATCA partner jurisdiction (i.e., a M				
rovid	ed to your juris	sdiction of residence.	•			•
Par	Ident	tification of Beneficial Owner (see	instructions)			
1 Name of individual who is the beneficial owner Antonio Papa 2 Country of citizens Germany					itizenship	
3 Pers	Permanent re iusstr. 10	esidence address (street, apt. or suite no., or	r rural route). Do not use a P. 0	O. box or in-care-	of address.	
City or town, state or province. Include postal code where appropriate. Berlin/Germany (DEU)/10245 Country Germany						
4	Mailing addre	ess (if different from above)				
	City or town,	state or province. Include postal code wher	e appropriate.		Country	
5	U.S. taxpaye	er identification number (SSN or ITIN), if requ	ired (see instructions)	6 Foreign tax i 1478902675	dentifying nun	nber (see instructions)
7	Reference nu	umber(s) (see instructions) 55887524	8 Date of birth (MM-DD-Y	(YY) (see instructions) 02-19-1991		
Part	II Clain	n of Tax Treaty Benefits (for chapt	er 3 purposes only) (see	instructions)		
9	I certify that	the beneficial owner is a resident of	Germany		within the me	eaning of the income tax
	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:					
Par	Cert	ification				
Under		ury, I declare that I have examined the information o	on this form and to the best of my ki	nowledge and belief it	is true, correct,	and complete. I further
•		dual that is the beneficial owner (or am authorized to form to document myself as an individual that is an				hich this form relates or
•	The person na	amed on line 1 of this form is not a U.S. person,				
•	The income to which this form relates is:					
(a) not effectively connected with the conduct of a trade or business in the United States,						
		connected but is not subject to tax under an application of a partnership of special income of special income of a partnership of special income of a partnership of special income of	·			
•	(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					
 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. 						
		I authorize this form to be provided to any withholding	, , ,			the beneficial owner or
\A/ S	if any certific	ng agent that can disburse or make payments of the ation made on this form becomes incorrect. tronic Substitute Form Statement:	income of which I am the beneficia	al owner. I agree that	I will submit a r	new form within 30 days
		venue Service does not require your cor	nsent to any provisions of t	his document oth	ner than the o	certifications
		blish your status as a non-U.S. individua	• •			
Cia-	n Horo	A 4 D				
Sigi	n Here	Antonio Papa	Iol Authorized To Sier For The D		3-03-2020	IM-DD-YYYY)
		Self Certified Electronic Signature Of The Individu	iai Authonzeu To Sign For The Bel	ileticiai Owner.	Date (IV	וווו סס וווו)

Antonio Papa Print name of signer

Capacity in which acting (if form is not signed by beneficial owner)