

(Rev. July 2017)

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

> For use by individuels. Entities must use Form W-8BEN-E.
> Go to www.irs.gov/FormW8BEN for instructions and the latest information.

OMB No. 1545-1621

Internal	Rovenua Servica	> Give this	form to the w	thholding ager	it or payer. Do	not send to the II	RS.	
Do No	OT use this form	그리고 그 사람들이 살아보고 살아보다 살아보다 살아보다 살아보다 살아내는 얼마나 얼마나 얼마나 얼마나 없는데 얼마나 없다.						Instead, use Form:
• You	are NOT an Indiv	idual	e en les jeus					W-8BEN-E
• You	are a U.S. citizen	or other U.S. person, incl	luding a reside	nt allen Individu	ខ្នាំ			W-9
• You		wner claiming that income				I trade or business	within the U.S.	W-8ECI
• You	are a beneficial o	wner who is receiving cor	npensation for	personal service	es performed i	n the United States	s	8233 or W-4
		ng as an intermediary .						W-8IMY
Note:	If you are residen ed to your jurisdic	it in a FATCA partner juris	diction (i.e., a l	Model 1 IGA juri	sdiction with re	ciprocity), certain	tax account infor	mation may be
Per								
1	Name of Individual who is the beneficial owner 2					2 Country of c		
s <u>November of the same of the </u>	Permanent residence address (street, apt. or sulte no., or rural route). Do not use a P.O. b					어린 프로마스	Federation	
3	Permanent resid	lence address (street, apt	. or sulte no., o	or rural route). E	o not use a P.	O. box or in-care-	of address.	
120							Country	
10	City or town, sta	ate or province. Include po	ostal code whe	ere appropriate.			Russian F	ederation
	Mailing address (if different from above)						TIZ (TIZ Z D ST TIT TT.	
4	Mailing address	(ii dilierent from above)	IN M					
	City or town, sta	ate or province. Include po	nstal code whe	re appropriate.			Country	
<u> </u>		TO CHARLEST MANAGED						
5	U.S. taxpayer id	entification number (SSN	or ITIN), if req	uired (see Instru	ctions)	6 Foreign tax	identifying numb	er (see instructions)
20 20 20 20	7 A B 2 V							
7	Reference numb	per(s) (see instructions)		8 Date of	birth (MM-DD-	YYYY) (see Instruc	lions)	
3101				<u> </u>	1			
10			aty identified o	n line 9 above t	o clalm a	_% rate of withhol	ding on (specify	type of Income):
10 10 10 10 10 10 10 10 10 10 10 10 10 1	Explain the addit	tional conditions in the Ar	ticle and parag	graph the benef	icial owner med	ets to be eligible fo	r the rate of with	holding:
W H								
Paril	M Certifica	ation						
Under p		declare that I have examined rjury that:	the information	on this form and	to the best of my	knowledge and belie	of it is true, correct,	and complete. I further
•	am using this form	that is the beneficial owner (o to document myself for chap	ter 4 purposes,	to sign for the inc	lividual that is the	a beneficial owner) of	all the income to v	hich this form relates or
•	\$400 At 10	on line 1 of this form is not a	U.S. person,					
•		ch this form relates is:			Chata			
		onnected with the conduct of	- Ph. 18 18 18 18 18 18 18 18 18 18 18 18 18		THE CONTRACTOR OF THE PARTY OF			
		ected but is not subject to tax	83 - 200 Mar 1232 - 22 - 23 - 10 - 10 -	2000 *** 1200 *** 4000****************************	ireaty, or			
12 , 1000 12 , 1200 13		are of a partnership's effective		, T.				
	the United States a	on line 1 of this form is a resi and that country, and						me tax treaty between
•	For broker transact	llons or barter exchanges, the	beneficial owns	er is an exempt fo	reign person as o	defined in the instruct	lons.	
	any withholding ag	orize this form to be provided ent that can disburse or make made on this form become	e payments of th					
Sign I	Here							
357		Signature of beneficial or	wner (or individu	al authorized to s	ign for beneficial	owner)	Date (M	M-DD-YYYY)
enge 18	Print	name of signer			C	apacity in which acti	ng (if form is not sig	ned by beneficial owner)
30 Page 18	ment of the section control of the c	- man din alla manana and alla alla and alla and alla and		43 98 400 S	conserved with the William State of Sta			