Form W-8BEN

(Rev. October 2021)

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.

- ► Go to www.irs.gov/FormW8BEN for instructions and the latest information.
- ▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NOT use this to	Offit II:			instead, use Form:
• You are NOT an i	individual			W-8BEN-E
• You are a U.S. cit	tizen or other U.S. person, including a resident alie	n individual		W-9
You are a benefic (other than perso	cial owner claiming that income is effectively connected on all services)	ected with the conduct o	f trade or business	within the United States
You are a benefice	cial owner who is receiving compensation for perso	onal services performed	in the United States	s 8233 or W-4
You are a person	acting as an intermediary			W-8IMY
Note: If you are res	sident in a FATCA partner jurisdiction (that is, a Nurisdiction of residence.			
Part I Ider	ntification of Beneficial Owner (see ins	tructions)		
1 Name of inc	dividual who is the beneficial owner	,	2 Country of o	citizenship
Alessandro	essandro Beninati Italy			
3 Permanent	residence address (street, apt. or suite no., or rura	al route). Do not use a P	.O. box or in-care	of address.
	Ludovico Fulci			
City or town, state or province. Include postal code where appropriate.				Country
Messina, Messina, 98122				Italy
4 Mailing add	dress (if different from above)			
City or town, state or province. Include postal code where appropriate.				Country
5 U.S. taxpay	yer identification number (SSN or ITIN), if required	(see instructions)		
	gn tax identifying number (see instructions) $98L27F158U$ 6b Check if FTIN not legally required			
7 Reference r benni-ale	ference number(s) (see instructions) 8 Date of birth (MM-DD-YYYY) (see instructions) 07-27-1998			
	im of Tax Treaty Benefits (for chapter 3		e instructions)	
	at the beneficial owner is a resident of Italy	1 1 3/1	,	within the meaning of the income tax
	veen the United States and that country.			
•	tes and conditions (if applicable—see instructions	s): The beneficial owner i	s claiming the prov	visions of Article and paragraph
	of the treaty identified on line	9 above to claim a	_ % rate of withho	lding on (specify type of income):
Explain the	e additional conditions in the Article and paragraph	the beneficial owner me	ets to be eligible fo	or the rate of withholding:
Part III Cer	tification			
Under penalties of perjury,	, I declare that I have examined the information on this form and to th	e best of my knowledge and belie	of it is true, correct, and co	omplete. I further certify under penalties of perjury that:
I am the individual t relates or am using	that is the beneficial owner (or am authorized to sign for the this form to document myself for chapter 4 purposes;	ne individual that is the bene	ficial owner) of all the	income or proceeds to which this form
The person named	on line 1 of this form is not a U.S. person;			
This form relates to):			
(a) income not effect	ctively connected with the conduct of a trade or business	in the United States;		
(b) income effective	ely connected with the conduct of a trade or business in the	ne United States but is not s	ubject to tax under ar	n applicable income tax treaty;
(c) the partner's sha	are of a partnership's effectively connected taxable incom	e; or		
(d) the partner's am	nount realized from the transfer of a partnership interest su	ubject to withholding under	section 1446(f);	
The person named on land.	line 1 of this form is a resident of the treaty country listed on line 9 α	of the form (if any) within the mea	ning of the income tax tre	eaty between the United States and that country; and
For broker transact	tions or barter exchanges, the beneficial owner is an exem	npt foreign person as defined	d in the instructions.	
	this form to be provided to any withholding agent that has contreents of the income of which I am the beneficial owner. I agree that			
Sign Here	I certify that I have the capacity to sign for the person	on identified on line 1 of this	form.	
	Signature of beneficial owner (or individual aut ALESSANDRO BENINATI Print name of signer	thorized to sign for beneficia	ll owner)	Date (MM-DD-YYYY)
For Panerwork Pa	Print name of signer	O-1 NI-	250477	Form W-8RFN (Poy. 10.2021)