Morgan Stanley

Global Stock Plan Services Substitute Form W-8BEN (for use by Individuals only) Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting

(Rev. October 2021)

PLEASE PRINT OR TYPE ALL APPLICABLE INFORMATION IN ENGLISH

General Instructions: This form may be completed only by or for a nonresident alien individual. If you are a U.S. citizen or an alien resident in the United States for tax purposes, do not use this form. Instead, complete a Form W-9. Failure to submit this form will result in maximum tax withholding being applied to dividends and gross proceeds from the sale of stock.

• Beneficial Owner. A beneficial owner of income is generally the person who is required under U.S. tax principles to include the payment in gross income on a tax return. A person that receives income as a nominee, agent, custodian, or other intermediary or a conduit is not a beneficial owner.

Permanent Residence Address. A permanent residence address is the address in the country where the beneficial owner claims to be a resident for purposes of that country's income tax.

You MUST complete this box with ei	ther Global ID or PUID:	1		Company		
☐ Global ID # (9 digits) ☐ PUID # (up to 12 Alphanumeric digits)		Com	pany Name	Stock Symbol	3-Digit Company # (Optional)	
PART I—IDENTIFICATION		 D				
Name of individual who is the beneficial owner	First Name		Name/Initial	Last Name	2. Country of Citizenship	
3. Permanent residence address (DO NOT USE A P.O. BOX OR IN CARE OF ADDRESS)	Street, Apartment or Suite No., o	r Rural R	coute		1	
	City or Town	State or	r Province	Postal Code	Country (do not abbreviate)	
Mailing Address (if different from above)	Street, Apartment or Suite No., or Rural Route					
	City or Town	State or	r Province	Postal Code	Country (do not abbreviate)	
5. U.S. taxpayer identification number (SSN or ITIN), if required (see IRS Form W-8BEN instructions)	6a. Foreign Tax Identifying Nun (See IRS Form W-8BEN inst \$8815265D		6b. Check if FTIN not legally required	7. Reference Number (Optional)	8. Date of Birth (MM-DD-YYYY)	
DADT II. CLAIM OF TAY T	DEATY DENIETIE (if an	- I : I- I :	·) /f- ·· - +- ·· 2 ·- ·			
PART II—CLAIM OF TAX T				•		
9. I certify that the beneficial own			J	,	•	
O. Special rates and conditions (if a	pplicable—see instructions): The	e benefici	al owner is claiming the	provisions of Article and parag	raph	
of	the treaty identified on line 9 about	ove to cla	nim a% rate	of withholding on (specify type	e of income):	
Explain the additional conditions	in the Article and paragraph the	peneficial	owner meets to be eligib	ole for the rate of withholding:		
PART III—CERTIFICATION	I					
Under penalties of perjury, I declare t I further certify under penalties of per I am the individual that is the bene relates or am using this form to doc The person named on line 1 of this This form relates to: (a) income not of a trade or business in the United taxable income; or (d) the partner's The person named on line 1 of this United States and that country; and For broker transactions or barter ex	rjury that: ficial owner (or am authorized to cument myself for chapter 4 purpor form is not a U.S. person; t effectively connected with the collistates but is not subject to tax us amount realized from the transfer form is a resident of the treaty cold	sign for the oses; nduct of nder an a r of a par untry list	a trade or business in the pplicable income tax trea thership interest subject to do n line 9 of the form (eneficial owner) of all the inconstruction. United States; (b) income effectly; (c) the partner's share of a place to withholding under section 14 if any) within the meaning of the	ne or proceeds to which this form ctively connected with the conductively connected with the conductively connected (46(f);	
Furthermore, I authorize this form to withholding agent that can disburse certification made on this form becomes	or make payments of the income of mes incorrect.	of which I	am the beneficial owner.			
			thic form			
☐ I certify that I have the capacity to		line 1 of		I many and a second		
☐ I certify that I have the capacity to Signature of beneficial owner (or individual aut		line 1 of	Date (MM-DD-YYYY)	Print name of signer		
☐ I certify that I have the capacity to		line 1 of		_		
I certify that I have the capacity to Signature of beneficial owner (or individual aut Signature of Signa	AFFI ertify that: The certification, incluing this certification is attached was efficient and unchanged from that date of provided an attachment of the choosign for the person identified on	DAVIT Oding the cective sinuntil the canges and	Date (MM-DD-YYYY) O1-O9-2O2 F UNCHANGED STATUS certification of foreign state ce January 1 of the currer date this new form is prov d the period the changes	tus of the beneficial owner and the year or to the date the accounded. If there have been any check the second	it was opened, whichever is earlier,	
I certify that I have the capacity as Signature of beneficial owner (or individual aut Signature of beneficial owner (or individual aut Sign Here Under penalties of perjury, I further coindicated on the Form W-8 to which the samuland the status has remained the samuland have checked the following box and Noted changes attached.	AFFI ertify that: The certification, incluing this certification is attached was efficient and unchanged from that date of provided an attachment of the choosign for the person identified on	DAVIT Oding the cective sinuntil the canges and	Date (MM-DD-YYYY) O1-O9-2O2 F UNCHANGED STATUS certification of foreign state ce January 1 of the currer date this new form is prov d the period the changes	tus of the beneficial owner and the year or to the date the accounded. If there have been any check the second	at was opened, whichever is earlier, anges to the above information, Date (MM-DD-YYYY)	
I certify that I have the capacity to Signature of beneficial owner (or individual aut Signature of Signa	AFFI ertify that: The certification, incluing this certification is attached was efficient and unchanged from that date of provided an attachment of the choosign for the person identified on	DAVIT Oding the cective sinuntil the canges and	Date (MM-DD-YYYY) O1-O9-2O2 F UNCHANGED STATUS certification of foreign state ce January 1 of the currer date this new form is prov d the period the changes	tus of the beneficial owner and the year or to the date the accounded. If there have been any check the second	It was opened, whichever is earlier anges to the above information,	

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Form **W-8BEN** (Rev. 10-2021)

GLOBAL STOCK PLAN SERVICES SUBSTITUTE FORM W-8BEN (09/2023) GSPSFW8

Morgan Stanley

Letter of Explanation for Absence of a Foreign Taxpayer Identifying Number on a Global Stock Plan Services Form W-8BEN for Individuals

Treasury Regulation $\S 1.1441-1T(e)(2)(ii)(B)$ and IRS FAQs require that a nonresident alien who is the beneficial owner of an amount subject to withholding ("Beneficial Owner") provide to a withholding agent either (i) the Beneficial Owner's foreign taxpayer identifying number (TIN) on or associated with a Form W-8BEN or (ii) a reasonable explanation as to why such foreign TIN is not available. Please complete the fields below and check the appropriate box to provide an explanation.

If you omitted field # 6b, FTIN not legally required, you must complete this form and provide it along with your Form W-8BEN.

You MUST provide either Global ID or PUID:

☐ Global ID No. (9 digits) ☐ PUID No. (up to 12 Alphanumeric) ☐ Company

COMPANY NAME ☐ STOCK SYMBOL ☐ 3-DIGIT COMPANY NO. (OPTIONAL)

Beneficial Owner First and Last Name:

Please check a or b below and provide an explanation if requested (check only one box):

a. ☐ Jurisdiction does NOT issue foreign TINs: The Form W-8BEN that Morgan Stanley currently has on file for the Beneficial Owner does not contain a foreign TIN because the jurisdiction in which the Beneficial Owner is resident does not issue TINs to individuals resident in such jurisdiction.

b. ☐ Other (explain):

COMPLETED FORMS MUST BE FAXED OR MAILED TO (by fax) +1 (614) 467-4471

(by overnight courier) Morgan Stanley, Global Stock Plan Services, 4343 Easton Commons, Suite 300, Columbus, OH 43219 (by regular mail) Morgan Stanley, Global Stock Plan Services, P.O. Box 182616, Columbus, OH 43218-2616

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LETTER OF EXPLANATION FOR ABSENCE OF A FOREIGN TAXPAYER IDENTIFYING NUMBER ON A GLOBAL STOCK PLAN SERVICES FORM W-8BEN FOR INDIVIDUALS—GLOBAL STOCK PLAN SERVICES FORM W-8BEN (09/2023) GSPSFW8

Morgan Stanley

Global Stock Plan Services Form W-8 BEN: Additional Documentation Certificate

NDIVIDUAL NAME				
You MUST complete this box with either Global ID or PUID:	Company			
☐ Global ID # (9 digits) or ☐ PUID # (up to 12 Alphanumeric digits)	Company Name	Stock Symbol	Plan Number	
Our records indicate that you are a nonresident alien (referre joint account, our records indicate that all parties to the account out (or our account information otherwise shows the United States, or (2) you have a current telephone numb then you must complete this form.	count are nonresident alies) that either: (1) you have	ns. If you have complet a permanent residence	ed Form W-8BEN and have , legal or mailing address in	
n order to ensure that the minimum applicable U.S. tax is wour Morgan Stanley branch office.	withheld, please complete	the following explanation	on and return this letter to	
certify that one of the following seven conditions has been	met (please check the app	ropriate box):		
. $\hfill \square$ I am a student at a U.S. educational institution and I \hfill	hold the appropriate visa.	(e.g. F, J, M, or Q visas)		
I am a teacher, trainee, or intern at a U.S. educational program, and I hold the appropriate visa. (e.g. J or Q v		t in an educational or c	ultural exchange visitor	
. I am a foreign individual assigned to a diplomatic post United States. (e.g. A visa)	or a position in a consula	te, embassy, or internat	ional organization in the	
. \square I am the spouse or unmarried child under the age of 2	1 years of one of the perso	ns described directly ab	oove.	
. I do not meet the substantial presence test found in Section 515 or 519), based on the three-year period calculation			ılations (or IRS Publication	
A: I was physically present in the U.S.	days this current calen	dar year. (example: 201	4)	
A1: This number multiplied by 1 =				
B: I was physically present in the U.S.	days in the first preced	ling calendar year. (exar	mple: 2013)	
B1: This number multiplied by 0.333 (1/3rd) =				
C: I was physically present in the U.S.	days in the second pre	ceding calendar year. (e	example: 2012)	
C1: This number multiplied by $0.1667 (1/6th) = $	·			
(CALCULATION: Number of days in A1 + B1 + C1 = the calculation above) equals or exceeds 183 days, <u>and</u> presence test" and must provide either a Form W-9 as a	the number in A1 was 31	days or more, then you	have met the "substantial	

6. I certify by either attaching a completed IRS Form 8840 or completing the following section below "closer connection exception" described in Section 301.7701(b)-2 of the U.S. Treasury Regulations. http://www.irs.gov/pub/irs-pdf/f8840.pdf	
Closer Connection Exception IRS Regulation §301.7701(b)-2	
All of the following apply (must check and provide name of foreign country):	
• I have been present in the U.S. for fewer than 183 days in the current year.	
During the current year I have a closer connection with the following foreign country where I (provide name)	I maintain my tax home: e of foreign country)
• I have not personally applied, or taken other affirmative steps to change my status to that of a during the current year nor do I have an application pending for adjustment of status during	*
The following facts demonstrate my closer connection with the foreign country listed as my tax hor	me above (Check all that apply):
☐ It is the location of my permanent home.	
☐ It is where my family is located.	
$\hfill \square$ It is where my personal belongings, such as automobiles, furniture, clothing and jewelry owned	by me and my family are located.
\square It is the location of social, political, cultural or religious organizations with which I have a current	nt relationship.
☐ It is where I conduct my routine personal banking activities.	
☐ It is where I conduct business activities.	
☐ It is where I hold a driver's license.	
☐ It is where I vote.	
☐ It is the country of residence I designate on official forms and documents.	
Provide one of the following forms of ID as confirmation of your nonresident status:	
☐ Passport ☐ Goverment ID	
Please sign this letter in the space provided and return it to us at your earliest convenience.	
Acknowledgement: I/we declare to the best of my/our knowledge, this information is correct and comple	te.
INDIVIDUAL NAME (PLEASE PRINT OR TYPE)	
a	01-09-2025

Please mail or fax documents to:
Fax No.: +1-614-467-4471
(by regular mail)
Morgan Stanley, Global Stock Plan Services
P.O. Box 182616, Columbus, OH 43218-2616
(by overnight courier)
Morgan Stanley, Global Stock Plan Services
4343 Easton Commons, Suite 300, Columbus, OH 43219

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SIGNATURE (SIGN IN THE BOX)

GLOBAL STOCK PLAN SERVICES FORM W-8 BEN: ADDITIONAL DOCUMENTATION CERTIFICATE (02/2020) GSPWLOE

DATE (MM/DD/YYYY)