## Form W-8BEN

(Rev. July 2017)

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 NO	T use this form if:		Instead, use Form:	
• You	are NOT an individual		W-8BEN-E	
• You	are a U.S. citizen or other U.S. person, including a resident alien individual		W-9	
	are a beneficial owner claiming that income is effectively connected with the conduct er than personal services)	of trade or busine	ess within the U.S.	
• You	are a beneficial owner who is receiving compensation for personal services performed	d in the United Sta	ates 8233 or W-4	
	are a person acting as an intermediary		W-8IMY	
Note:	If you are resident in a FATCA partner jurisdiction (i.e., a Model 1 IGA jurisdiction with ed to your jurisdiction of residence.		ain tax account information may be	
Part	Identification of Beneficial Owner (see instructions)			
1	Name of individual who is the beneficial owner	2 Country	2 Country of citizenship	
Juan Leonardo Soto Prado		Venezuela		
3	Permanent residence address (street, apt. or suite no., or rural route). Do not use a	P.O. box or in-ca	are-of address.	
Rancl	ho grande a Aguacatico, Manicomio #23			
	City or town, state or province. Include postal code where appropriate.		Country	
Carac	cas, Distrito Capital, 1010		Venezuela	
4	Mailing address (if different from above)			
	City or town, state or province. Include postal code where appropriate.		Country	
5	U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)	6 Foreign t	ax identifying number (see instructions)	
7	Reference number(s) (see instructions)  8 Date of birth (MM-DD-YYYY) (see instructions)			
Part	Claim of Tax Treaty Benefits (for chapter 3 purposes only) (s	ee instructions	3)	
9	I certify that the beneficial owner is a resident of		within the meaning of the income tax	
	treaty between the United States and that country.		<u> </u>	
10	Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph			
	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 n	neets to be eligible	e for the rate of withholding:	
Part	III Certification			
	penalties of perjury, I declare that I have examined the information on this form and to the best of	my knowledge and b	pelief it is true, correct, and complete. I further	
certily t	under penalties of perjury that:			
•	• 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 for chapter 4 purposes,			
•	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 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 transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.			ructions.	
	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 days if any certification made on this form becomes incorrect.			
Sign	Here			
	Signature of beneficial owner (or individual authorized to sign for benefic	cial owner)	Date (MM-DD-YYYY)	
	Drint name of cianar			
	Print name of signer		acting (if form is not signed by beneficial owner)	