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 No	OT 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 alier	n individual		W-9	
	are a beneficial owner claiming that income is effectively connected than personal services)	cted with the conduct of t	trade or business	within the United States W-8ECI	
• You	are a beneficial owner who is receiving compensation for person	nal services performed in	the United States	s 8233 or W-4	
• You	are a person acting as an intermediary			W-8IMY	
	If you are resident in a FATCA partner jurisdiction (that is, a M				
provid	ed to your jurisdiction of residence.		ith reciprocity), ce	ertain tax account information may be	
Par	, , , , , , , , , , , , , , , , , , ,	ructions)			
1	Name of individual who is the beneficial owner		2 Country of c	itizenship	
	IIR KUMAR	lacata) Danielaca a D.G	INDIA	-C	
3 302 E	Permanent residence address (street, apt. or suite no., or rural BEST HOME 9, STREET NO 1, ARYA NAGAR, NEAR ASQUAR	·		ot address.	
City or town, state or province. Include postal code where appropriate.			Country		
NOID	A, UTTAR PRADESH, 201301			INDIA	
4	Mailing address (if different from above)				
	City or town, state or province. Include postal code where app	propriate.		Country	
5	U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)				
6a	Foreign tax identifying number (see instructions) DASPK4602R	6b Check if FTIN not I	legally required .		
7	Reference number(s) (see instructions) 8 Date of birth (MM-DD-YYYY) (see instructions) 08-05-1988				
Par	Claim of Tax Treaty Benefits (for chapter 3	purposes only) (see	instructions)		
9	I certify that the beneficial owner is a resident of INDIA		,	within the meaning of the income tax	
	treaty between the United States and that country.				
10	Special rates and conditions (if applicable – see instructions): The beneficial owner is claiming the provisions of Article and paragraph				
	12(2) of the treaty identified on line	e 9 above to claim a15 % rate of withholding on (specify type of income):			
ROYALITY Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding:					
				r the rate of withholding:	
_	NO PERMANANT ESTABBLISHMENT IN USA AS PER ART	TICLE V(FIVE)			
Part					
Under p	enalties of perjury, I declare that I have examined the information on this form and to the	e best of my knowledge and belief it	t is true, correct, and cor	mplete. I further certify under penalties of perjury that:	
relat	the individual that is the beneficial owner (or am authorized to sign for the es or am using this form to document myself for chapter 4 purposes;	e individual that is the benefic	cial owner) of all the	income or proceeds to which this form	
	person named on line 1 of this form is not a U.S. person;				
• This form relates to:					
(a) income not effectively connected with the conduct of a trade or business in the United States;					
. ,	(b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an applicable income tax treaty;				
(c) the partner's share of a partnership's effectively connected taxable income; or (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);					
()	erson named on line 1 of this form is a resident of the treaty country listed on line 9 of	,	(/ /	aty between the United States and that country, and	
	proker transactions or barter exchanges, the beneficial owner is an exemp	* **	•	aty between the office offices and that country, and	
	nore, I authorize this form to be provided to any withholding agent that has contro			eneficial owner or any withholding agent that can	
disburs	e or make payments of the income of which I am the beneficial owner. I agree that			ication made on this form becomes incorrect.	
Sign Here					
Sigil	Here Sudhir Kumar			11 07 2024	
	Signature of beneficial owner (or individual auth	norized to sign for beneficial o	owner)	11-07-2024 Date (MM-DD-YYYY)	
	SUDHIR KUMAR			Date (WIN DD 1111)	
Print name of signer					
	<u> </u>				