Form W-8ECI

(October 1998)

Department of the Treasury Internal Revenue Service

Certificate of Foreign Person's Claim for Exemption From Withholding on Income Effectively Connected With the Conduct of a Trade or Business in the United States

► See separate instructions. ▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Note: Persons submitting this form must file an annual U.S. income tax return to report income claimed to be effectively connected with a U.S. trade or business (see instructions).

► Section references are to the Internal Revenue Code.

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Do not use	this form for:				Instead, use	Form:	
• A benefic	al owner solely claiming foreign status or treaty benefits				W	/-8BEN	
	partnership (unless claiming an exemption from U.S. withholding on income usiness in the United States)			vith the condu		V-8IMY	
A foreign claiming to	government, international organization, foreign central bank of issue, tax-exe he applicability of section(s) 501(c), 892, 895, or 1443(b)	empt organ	ization, or pr	ivate foundati	on, W	/-8EXP	
• A person	acting as an intermediary				W	V-8IMY	
Note: See in	nstructions for additional exceptions.						
Part I	Identification of Beneficial Owner (See instructions.)						
1 Name	Name of individual or organization that is the beneficial owner			2 Country of incorporation or organization			
3 Type	of entity (check the appropriate box):	n 🗌	Partnership	Tru	st 🔲 E	Estate	
	ivate foundation	d entity		☐ For	eign governm	ent	
4 Perma	nent residence address (street, apt. or suite no., or rural route). Do not use	a P.O. bo	C .				
City o	City or town, state or province. Include postal code where appropriate.			Country (do not abbreviate)			
5 Busin	Business address in the United States (street, apt. or suite no., or rural route). Do not use a P.O. box.						
City o	r town, state, and ZIP code						
6 U.S. t	U.S. taxpayer identification number (required—see instructions) SSN or ITIN EIN					al)	
8 Accou	nt number(s) (optional)						
-	y each item of income that is, or is expected to be, received from the payer iness in the United States						
Part II	Certification						
Sign Here	 Under penalties of perjury, I declare that I have examined the information on this formand complete. I further certify under penalties of perjury that: I am the beneficial owner (or I am authorized to sign for the beneficial owner) of all The amounts for which this certification is provided are effectively connected with and are includible in my gross income (or the beneficial owner's gross income) for The beneficial owner is a foreign person. 	I the income the conduct the taxable	to which this f	form relates, pusiness in the			