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 alie	n individual		W-9			
	are a beneficial owner claiming that income is effectively conneer than personal services)			within the United States W-8ECI			
• You	are a beneficial owner who is receiving compensation for perso	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 N ed to your jurisdiction of residence.	Model 1 IGA jurisdiction w	rith reciprocity), c	ertain tax account information may be			
Par	Identification of Beneficial Owner (see inst	tructions)					
1	Name of individual who is the beneficial owner	,	2 Country of c	sitizenship			
3	Permanent residence address (street, apt. or suite no., or rura	ll route). Do not use a P.C). box or in-care-	of address.			
	City or town, state or province. Include postal code where appropriate.			Country			
4	Mailing address (if different from above)						
	City or town, state or province. Include postal code where app		Country				
5	U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)						
6a	Foreign tax identifying number (see instructions)	6b Check if FTIN not	legally required .				
7	Reference number(s) (see instructions)	-DD-YYYY) (see ir	nstructions)				
Par	II Claim of Tax Treaty Benefits (for chapter 3	purposes only) (see	instructions)				
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.						
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 mee	ts to be eligible fo	or the rate of withholding:			
Part	Certification						
	enalties of perjury, I declare that I have examined the information on this form and to the	e best of my knowledge and belief i	t is true, correct, and co	mplete. I further certify under penalties of periury that:			
• I am	the individual that is the beneficial owner (or am authorized to sign for thes 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;						
	form relates to:						
. ,	come not effectively connected with the conduct of a trade or business i						
. ,	come effectively connected with the conduct of a trade or business in the		oject to tax under an	applicable income tax treaty;			
` '	e partner's share of a partnership's effectively connected taxable income e partner's amount realized from the transfer of a partnership interest su	•	ection 1446(f):				
` '	erson named on line 1 of this form is a resident of the treaty country listed on line 9 o		***	aty between the United States and that country; and			
	proker transactions or barter exchanges, the beneficial owner is an exem	* **	•	ary between the office offices and that country, and			
Furtherr	nore, I authorize this form to be provided to any withholding agent that has control or make payments of the income of which I am the beneficial owner. I agree that	ol, receipt, or custody of the inco	me of which I am the b				
Sign	☐ I certify that I have the capacity to sign for the person	on identified on line 1 of this f	orm.				
	Signature of beneficial owner (or individual aut	horized to sign for beneficial	owner)	Date (MM-DD-YYYY)			
	Print name of signer						

PRIVATE BANKING

(Rev. October 2021) Department of the Treasury		► For use by individuals. Entities must use Form W-8BEN-E. ► Go to www.irs.gov/FormW8BEN for instructions and the latest information.		OMB No. 1545-1621				
nternal Revenue	Service	► Give this form to the withholding agent or payer. Do not send to the IRS.		not send to the IRS.				
Oo NOT use	NOT use this form if:				Instead, use Form:			
You are NO	T an individua	1			W-8BEN-E			
• You are a U.S. citizen or other U.S. person, including a resident alien individual								
(other than	personal servi	er claiming that income is effectively ces)			nited States W-8ECI 8233 or W-4			
You are a p	erson acting a	s an intermediary			W-8IMY			
		a FATCA partner jurisdiction (that	is, a Model 1 IGA jurisdiction	with reciprocity), certain tax ac	count information may be			
Part I	•	n of residence. ion of Beneficial Owner (se	ae instructions)					
		who is the beneficial owner	ee iristi uctiorisj	2 Country of citizenship				
Max	Max Mustermann 2 z.B. Germany							
	_	ce address (street, apt. or suite no.,	or rural route). Do not use a P	.O. box or in-care-of address.				
	sterstraße			0,				
City or town, state or province. Include postal code where appro 12345 Musterhausen		iere appropriate.	opriate. Country z.B. Ger					
		ss (if different from above)		z. b. Ge	IIIIaily			
	J (.	,						
City o	or town, state of	state or province. Include postal code where appropriate.		Country	Country			
5 U.S.	taxpayer ident	ification number (SSN or ITIN), if re-	quired (see instructions)					
6a Forei	Foreign tax identifying number (see instructions) 6b Check if FTIN not legally required							
oa rorei	gir tax identiliyi	ing number (see instructions)	OD CHECK II FIIN IIO	t legally required				
	ence number(s 4567891	s) (see instructions)		8 Date of birth (MM-DD-YYYY) (see instructions) z, B, 03-25-1970				
Part II								
9 I certify that the beneficial owner is a resident of Land in dem Sie steuerlich ansässig sind, z.B. "Germany" within the meaning of the incom								
	treaty between the United States and that country.							
10 Spec	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):							
-	or the deaty identified on line a above to oldfill a % rate of withholding on (specify type of income):							
Expla	Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding:							
Part III	Certificati	***	and the best of an inches	Market and the second s				
Inder penalties of	f perjury, I declare th	nat I have examined the information on this form	and to the best of my knowledge and belie	f it is true, correct, and complete. I further of	ertify under penalties of perjury that:			
urthermore, I au	uthorize this form to	be provided to any withholding agent that h	as control, receipt, or custody of the inc	ome of which I am the beneficial owner	or any withholding agent that can			
lisburse or make	payments of the i	income of which I am the beneficial owner. I a	agree that I will submit a new form wit	thin 30 days if any certification made o	n this form becomes incorrect.			
		rtify that I have the capacity to sign for t	he person identified on line 1 of this	form.				
Sign Here		11 15-16			004			
	' <u>w</u>	M. Mustermans		01-30-2				
	May	Signature of beneficial owner (or individual owner) Mustermann	dual authorized to sign for beneficia	l owner) Dat	e (MM-DD-YYYY)			
		me of signer						
	Print nar							

BITTE FÜLLEN SIE DAS FORMULAR W-8BEN WIE FOLGT AUS:

Part I

- 1 Ihr Vor- und Nachname
- 2 Ihre Nationalität in englischer Sprache (bei 2 oder mehreren darf nur eine angegeben werden, dann wenn möglich die des Landes des Hauptwohnsitzes)
- 3 Ihre Adresse (das Land in englischer Sprache im Feld "Country"). Bitte keine Postfach oder c/o Adresse
- 4 Ihre Versandanschrift, falls vorhanden (das Land in englischer Sprache im Feld "Country")
- 5 Ihre US-amerikanische Steuernummer, falls vorhanden (Hinweis bei voller US-Steuerpflicht ist stattdessen ein W-9 Formular einzureichen)
- 6 Nur falls zur Hand: Ihre nicht US-Steuernummer
- 7 Ihre Konto- bzw. Depotnummer
- 8 Ihr Geburtsdatum in Format Monat-Tag-Jahr (z. B. 03-25-1970 für den 25. März 1970)

Part II

Wichtig: das Land, in dem Sie steuerlich ansässig sind, in englischer Sprache (in der Regel ist das das Land der Hauptadresse)

Part II

10 Bitte keinerlei Streichungen oder Ergänzungen vornehmen

Sign Here

Hier unterschreiben Sie bitte und geben das Datum an (Format: Monat-Tag-Jahr).

Bei "Print Name of Signer" bitte Ihren Namen in Druckbuchstaben.

Falls Sie das Formular für jemanden anderen unterschreiben und dazu berechtigt sind (z.B. aufgrund Vollmacht), so kreuzen Sie bitte das Kästchen vor "i certify..." an.

Bitte übermitteln Sie das Formular dann an: BNP Paribas Wealth Management, 90002 Nürnberg

Stand: Oktober 2021