## 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	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 alier	n individual		W-9		
	are a beneficial owner claiming that income is effectively conne er than personal services)	ected with the conduct of t	rade or business	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-8 <b>I</b> MY		
	If you are resident in a FATCA partner jurisdiction (that is, a Med to your jurisdiction of residence.	1odel 1 IGA jurisdiction w	ith reciprocity), co	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	itizenship		
3	Permanent residence address (street, apt. or suite no., or rura	l route). <b>Do not use a P.C</b>	), box or in-care-	of address.		
	City or town, state or province. Include postal code where app	propriate.		Country		
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)		<u></u>		
6a	Foreign tax identifying number (see instructions)	6b Check if FTIN not	legally required .			
7	Reference number(s) (see instructions)	8 Date of birth (MM-	-DD-YYYY) (see ir	nstructions)		
Part	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.					
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 meet	ts to be eligib <b>l</b> e fo	r the rate of withholding:		
Part	III 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 it	t is true, correct, and cor	mplete. I further certify under penalties of perjury that:		
relate	the individual that is the beneficial owner (or am authorized to sign for the sor 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; form relates to:					
	come not effectively connected with the conduct of a trade or business i	in the United States;				
(b) in	come effectively connected with the conduct of a trade or business in th	e United States but is not sub	oject to tax under an	applicable income tax treaty;		
(c) th	e partner's share of a partnership's effectively connected taxable income	e; or				
(d) th	e partner's amount realized from the transfer of a partnership interest su	bject to withholding under se	ction 1446(f);			
=	erson named on line 1 of this form is a resident of the treaty country listed on line 9 or	• •	-	aty between the United States and that country; and		
	roker transactions or barter exchanges, the beneficial owner is an exemple transactions or barter exchanges, the beneficial owner is an exemple.					
	nore, I authorize this form to be provided to any withholding agent that has contro or make payments of the income of which I am the beneficial owner. I agree that					
Sign	Here I certify that I have the capacity to sign for the personal large state of the pe	on identified on line 1 of this fo	orm.			
	Signature of beneficial owner (or individual auth	horized to sign for beneficial o	owner)	Date (MM-DD-YYYY)		
	Print name of signer					

## Written Explanation for W-8BEN Form



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OU Credit Union Member Information								
First Name	Middle	Last						
Mailing Address	City	State	ZIP	Phone				
Permanent Address	City	State	ZIP					

## **Explanation of U.S. Adresses, U.S. Phone Number, or U.S. Birth Place**

Per Internal Revenue Service (IRS) regulations, OU Credit Union is required to obtain a copy of the passport, foreign driver's license, or certificate of residency, and a written explanation from members who provide any of the following:

- U.S. address
- U.S. phone number
- Address outside the country of permanent residence
- U.S. place of birth

This written explanation must explain how the address or phone number is associated with the account holder, the purpose of the address or phone number and to whom it belongs, if not the member, and the reason for loss of U.S. citizenship, if born in the U.S.

Write the explanation in the box below.

Explanation		
Signature	Date	

