This is a sample for students receiving non-compensatory scholarships through an "overaward." This sample does not apply to other situations including payments for compensatory scholarships or fellowships.

## Form W-8BEN

(Rev. July 2017)

## **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.

OMB No. 1545-1621

	n if:						Instead, use Fon
<ul> <li>You are NOT an indi</li> </ul>	vidual						W-8BEN
You are a U.S. citize	n or other U.S.	person, including a resider	nt alien individual .				w
You are a beneficial	owner claiming	that income is effectively	connected with the c	onduct of tra	ade or business	within the U.S	•
(other than personal	services) .		Must be a	address of	country in wh	ich vou wer	e immediately
You are a beneficial	owner who is re	eceiving compensation for			ng U.S. This is		
You are a person act	ting as an inten	mediary	<u> </u>				W-8iN
Note: If you are reside provided to your jurisd	int in a FATCA   liction of reside	partner jurisdiction (i.e. a Nence.	Model 1 IGA jurisdiction	on with recip	procity), certain	ax account in	formation may be
		Beneficial Owner (see	instructions)	<del></del>			
1 Name of Indivi	dual who is the	beneficial owner		]	2 Country of c	itizenship	
3 Permanent res	idence addres	s (strewapt. or suite no., o	or rural route). Do not	use a P O	hox or in-care	of address	····
· · · · · · · · · · · · · · · · · · ·	adinoo adanoo	o (dire) bupi. or dance no., e	,, , , , , , , , , , , , , , , , , , ,	. 450 4 1 .0.	box of in our	01 444.000.	
City or town, s	tate or provinc	e. Include postal code whe	re appropriate.			Country	
			E	nter curren	t U.S. mailing	address if y	ou plan to stay long
not have an SSN es	s (if different fr	om above)			<u> </u>	,	. , ,
							<del> </del>
City or town, s	tate or province	e. Include postal code whe	re appropriate Does	s not apply	; do not fill	Country	oes not apply; do no
5 II S taypayar	identification n	umber (SSN or ITIN), if requ	uirod (soe instructions	c)	6 Foreign toy		nber (see instructions)
3 40.0. taxpayer	dentineation	umber (3314 of 11114), id-eq	uited (See ilistractions	)	o Poleigh tax	denti-ing nui	iber (see instructions)
7 Reference nun	nber(s) (see inst	tructions)	8 Date of birth (	MM-DD-VV	YY) (see instruct	rione)	
1 Holoronoo han	iber(a) (ace iriai	in the stories	Date of billing	ו ו-טט-ווווון	1 1) (Ste matrue)	Doe	s not apply; do not
Part II Claim	of Tax Trea	ity Benefits (for chap	ter 3 purposes or	nly) (see ir	structions)	Enter	your tax treaty
	_	ner is a resident of		7			ry. For te ta
treaty between	n the United St	ates and that country.					ole, "Norway."
10 Special rates	and condition	s (if applicable - see instru	ctions): The beneficia	d owner is cl	aiming the prov	isions of Articl	e and paragraph
		of the treaty identified o	n line 9 above to clai	m a 9	6 rate of withhol	ding on (speci	fy type of income):
				7			
Explain the at	ditional conditi	ons in the Article and parag	graph the beneficial o	wner meets	to be eligible fo	r the rate of w	ithholding:
Explain the ab	ditional conditi	ons in the Article and parag	graph the beneficial o	wner meets	to be eligible fo	r the rate of w	ithholding:
		ons in the Article and parag				r the rate of w	ithholding:
Part III Certifi	cation	Most scholarship bend	efits allow "0 %" ta	x withhold	ling.		1
Part III Certifi	<b>cation</b>		efits allow "0 %" ta	x withhold	ling.		1
Part III Certifi Under penalties of perjury certify under penalties of	cation y, I declare that I h purjury that:	Most scholarship benchave examined the information	efits allow "0 %" ta	x withhold best of my kn	ling.	f it is true, corre	ct, and complete. I further
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