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

	OT use this fo				Instead, use Form:			
	are NOT an ir				W-8BEN-E			
• You		zen or other U.S. person, including a resident alien al owner claiming that income is effectively connected services)		of trade or business	within the United States			
`	•	ial owner who is receiving compensation for persor	nal services performed	in the United States				
		acting as an intermediary	•					
		<u> </u>						
provid	ded to your ju	sident in a FATCA partner jurisdiction (that is, a Mirisdiction of residence.		with reciprocity), c	ertain tax account information may be			
Par		tification of Beneficial Owner (see insti	ructions)	0 0	- 141			
1	Name of inc	lividual who is the beneficial owner		2 Country of o	citizensnip			
3	Permanent	residence address (street, apt. or suite no., or rural	route). Do not use a F	P.O. box or in-care	of address.			
	City or towr	n, state or province. Include postal code where app	ropriate.		Country			
4	Mailing add	ress (if different from above)						
	City or towr	n, state or province. Include postal code where app	ropriate.		Country			
-5	U.S. taxpay	payer identification number (SSN or ITIN), if required (see instructions)						
6a	Foreign tax	identifying number (see instructions)	6b Check if FTIN no	ot legally required .				
7	Reference r	umber(s) (see instructions)	8 Date of birth (M	M-DD-YYYY) (see i	nstructions)			
Par	t II Clai	m of Tax Treaty Benefits (for chapter 3	purposes only) (se	e 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 t	the beneficial owner me	eets to be eligible fo	or the rate of withholding:			
Part	III Cerl	ification						
Under p	enalties of perjury,	I declare that I have examined the information on this form and to the	best of my knowledge and beli	ef it is true, correct, and co	omplete. I further certify under penalties of perjury that:			
		nat is the beneficial owner (or am authorized to sign for the	e individual that is the ben	eficial owner) of all the	income or proceeds to which this form			
	•	this form to document myself for chapter 4 purposes;						
	form relates to:	on line 1 of this form is not a U.S. person;						
		tively connected with the conduct of a trade or business in	the United States					
		y connected with the conduct of a trade or business in the		subject to tax under ar	applicable income tax treaty:			
		re of a partnership's effectively connected taxable income		,				
(d) th	(d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);							
• The p	• The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and							
• For l	broker transacti	ons or barter exchanges, the beneficial owner is an exemp	ot foreign person as define	d in the instructions.				
		his form to be provided to any withholding agent that has control nts 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 person	n identified on line 1 of this	s form.				
		Signature of beneficial owner (or individual auth	orized to sign for benefici	al owner)	Date (MM-DD-YYYY)			
		Print name of signer						

Lightspeed Financial Services Group

Name of Securities Firm

Dear Valued Customer

102014 C Letter A

I.E. Code Account Number

In order to better service your financial needs, our firm has engaged Wedbush Securities Inc., a member of the New York Stock Exchange and other major exchanges, as our correspondent broker-dealer clearing agent (the "Clearing Agent"), and accordingly we have opened an account under your name with our Clearing Agent on a correspondent broker basis pursuant to a written agreement between us and the Clearing Agent.

Under this agreement, the Clearing Agent will: provide cashiering services; monitor compliance of credit according to applicable rules, regulations and policies; prepare and mail trade notifications and periodic account statements; and provide for the dissemination of proxy, tender offer and other similar shareholders' materials. In addition, the Clearing Agent may provide, upon our specific instructions, order execution and/or certificate clearance. However, the Clearing Agent will not be involved with or have responsibility for decisions regarding transactions in your account. Moreover, under no circumstances will we be an agent of the clearing agent nor be in any partnership, association or joint venture relationship with the clearing agent. If the Clearing Agent pays interest on your qualified credit balances left on deposit in your account, for the purpose of pending investment or reinvestment, we may receive an administrative fee that would be in the form of an interest rate decrease of no more than one-half of one percent from the interest rate established for credit balances.

Since you continue to be a customer of our firm, the opening and approval of accounts and the entry of orders and instructions regarding the deposit or withdrawal of securities or money for your account must be handled by us. We will continue to be responsible for all activities in connection with your account, and inquiries or complaints regarding your account should be directed to us. You may access your account online, at any time, by visiting www.myclientlink.com. Please contact us for a password.

You acknowledge that in connection with this Agreement that we, or our Clearing Agent, may submit and collect nonpublic and public information to consumer and industry reporting agencies. Upon your written request, we will inform you if we have obtained information through these inquiries, and if so, we will provide you with the name and address of the consumer and industry reporting agency.

To acknowledge your understanding of these matters and to provide us with your required taxpayer certification and beneficial ownership

	nt within 20 days. If you have any questions	, please call us at your convenience.	mposed by the IRS	
ACCOUNT AGREEMENT,	TAXPAYER CERTIFICATION, AND BEN	EFICIAL OWNERSHIP ELECTION		
Under penalties of perjury, I (1) that the number supplied (2) I am not subject to back Revenue Service that I a notified me that I am no BACKUP WITHHOLDING, I (3) I am a U.S. Person (inclu (4) Limited Liability Compa (5) Exemption from FATCA Rule 14b-1(c) of the Securit customers who are beneficia	certify that: below is my correct taxpayer identification up withholding because: (a) I am exempt from subject to backup withholding as a result of the subject to backup withholding and a wou must cross out certification (2) and adding a U.S. Resident Alien) ny. Enter the tax classification (C=C Corporate of the subject	number, and om backup withholding, or (b) I have not been not alt of a failure to report all interest or dividends, (IF YOU HAVE BEEN NOTIFIED BY THE IRS THAT YOVE.) ration, S= S Corporation, P= Partnership) questing companies of the name, address and seess the customer objects. If you do not object to	or (c) the IRS has	
Statement-Facts About You account is to be handled in Costs and Other Matters"	nowledge that you have read and received r Borrowing Costs and Other Matters". the manner described in these agreement	d a copy for your records of this agreement at You acknowledge your understanding and agre is and 2) the "Disclosure Statement-Facts Abo in Paragraph 9, and 3) you understand tha	ement that 1) you ut Your Borrowing	
The Internal Revenue Servi avoid backup withholding.	ce does not require your consent to any p	provision of this document other than the certifi	cations required to	
ENTITY NAME (If applicable)				
PRINT NAME	SOCIAL SECURITY/TAX ID NUMBER	CUSTOMER SIGNATURE - IF ENTITY ACCOUNT, PLEASE SIGN IN CAPACITY (TTEE, PRESIDENT, ETC.)	DATE	
PRINT NAME	SOCIAL SECURITY/TAX ID NUMBER	JOINT CUSTOMER SIGNATURE (IF JOINT ACCOUNT, BOTH MUST SIGN)	DATE	
	SIGNATURE GUARANTEED	SIGNATURE GUARANTEED BY (For Broker-Dealer Use Only)		