## Form W-8EC

(Rev. October 2021)

Department of the Treasury Internal Revenue Service

## Certificate of Foreign Person's Claim That Income Is Effectively Connected With the Conduct of a Trade or Business in the United States

► Section references are to the Internal Revenue Code.

▶ Go to www.irs.gov/FormW8ECI 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

Note: P	ersons sı	ubmitting this form must file an annual U.S. incom	e tax return	to repo	rt income claimed to b	e effectively o	connected with a	U.S. trade of	r business. See instructions.	
Do no	t use th	is form for:							Instead, use Form:	
• A be	neficial	owner solely claiming foreign status or tre	aty benefi	ts .					W-8BEN or W-8BEN-E	
• A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private										
four	ndation,	or government of a U.S. possession clain	ning the ap	plicat	oility of section(s) 1	15(2), 501(c	), 892, 895, or	1443(b)	W-8EXP	
Note: These entities should use Form W-8ECI if they received effectively connected income and are not eligible to claim an exemption for chapter or 4 purposes on Form W-8EXP.									exemption for chapter 3	
		artnership or a foreign trust (unless claiming a trade or business in the United States)	ng an exer	nption		ding on inco	ome effectively	/ connecte		
		,							W-8BEN-E or W-8IMY	
Note	e: See ir	eting as an intermediary		• •					W-8IMY	
Part		Identification of Beneficial Own			tions)					
Name of individual or organization that is the beneficial ow				ner			2 Country of incorporation or organization			
Comm	Commerzbank AG, New York Branch			•			Federal Repu	ederal Republic of Germany		
3	Name	of disregarded entity receiving the payme	nts (if app	icable	e)					
4		of entity (check the appropriate box):								
	=	artnership	∐ Simpl			Comple		☐ Ta	ax-exempt organization	
	_	oreign Government - Controlled Entity	Grant			_	bank of issue			
		oreign Government - Integral Part			l organization	Corpora	ation			
		rivate foundation	Individ			Estate				
5 Permanent residence address (street, apt. or suite no., or rural route). <b>Do not use a P.O. box or in-care-of address.</b> Kaiserstrasse 16										
Kaisei			nde where	annro	priate		1,	Country		
City or town, state or province. Include postal code where a					рпате.		1	•	nublic of Cormony	
6 Business address in the United States (street, apt. or suite no., or rural route). <b>Do not use a P.O. box or in-care-of address.</b>										
		•	or Suite	110., 0	or rural route). <b>Do n</b>	ioi use a P.	O. BOX OF III-C	are-or au	uress.	
225 LII	city o									
NI \	•	r town, state, and ZIP code								
7		<mark>' 10281-1050</mark> axpayer identification number (required—s	ee instruc	tions)	SSN or ITIN	<b>☑</b> EIN		13-268	2661	
	-	ın tax identifying number (FTIN)								
		DE114103514-00001	8b Check if FTIN not legally required							
9	Refere	ence number(s) (see instructions)	10 Date of birth (MM-DD-YYYY)							
		,	,							
11		pecify each item of income that is, or is expected to be, received from the payer that is effectively connected with the conduct of a trade or								
	busine	iness in the United States (attach statement if necessary). Interest, fees, and other income from US sources that constitutes fixed								
		eterminable annual or periodic income (FDAP), as defined under the Internal Revenue Code Section 1441 and regulations thereunder								
	that is	t is attributable to Commerzbank AG's New York Branch for US federal income tax purposes.								
12		here to certify that: you are a dealer in securities (as defined in section 475(c)(1)); you are a transferor of an interest in a publicly traded partnership								
		claiming an exception from withholding under Regulations section 1.1446(f)-4(b)(6); and any gain from the transfer of the PTP interest associated								
	with th	is form is effectively connected with the cond	luct of a tra	de or	business within the l	United States	s without regard	d to section	864(c)(8)	
Part		Certification							_	
		Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and 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 payments to which this form relates,								
		The amounts for which this certification is provided are effectively connected with the conduct of a trade or business in the United States,								
		The income for which this form was provided is includible in my gross income (or the beneficial owner's gross income) for the taxable year, and								
c:	an	• The beneficial owner is not a U.S. person.								
Sign Here		Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the payments of which I am the beneficial owner or any withholding agent that can disburse or make payments of the amounts of which I am the beneficial owner.								
	-	I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.								
		I certify that I have the capacity to sign for the person identified on line 1 of this form.  Min Ismalow								
		542D1897F8				Metin Ismailo	V	01-13-2025		
		Signature of beneficial owner (or individual authorized to sign for the beneficial owner)					Print name	•	Date (MM-DD-YYYY)	
				J 10		,	i iiit iidiile		==/	