Form **W-8ECI**

(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: Persons submitting this form must file an annual U.S. income tax return to report income claimed to be effectively connected with a U.S. trade or business. See instructions.

Do not use this form for:	**Instead, use Form:**
• A beneficial owner solely claiming foreign status or treaty benefits	W-8BEN or W-8BEN-E
• A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming the applicability of section(s) 115(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 3 or 4 purposes on Form W-8EXP.	
• A foreign partnership or a foreign trust (unless claiming an exemption from U.S. withholding on income effectively connected with the conduct of a trade or business in the United States)	W-8BEN-E or W-8IMY
• A person acting as an intermediary	W-8IMY
Note: See instructions for additional exceptions.	

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual or organization that is the beneficial owner
Nordea Bank Abp

2 Country of incorporation or organization
Finland

3 Name of disregarded entity receiving the payments (if applicable)

4 Type of entity (check the appropriate box):

☐ Partnership	☐ Simple trust	☐ Complex trust	☐ Tax-exempt organization
☐ Foreign Government - Controlled Entity	☐ Grantor trust	☐ Central bank of issue	
☐ Foreign Government - Integral Part	☐ International organization	☑ Corporation	
☐ Private foundation	☐ Individual	☐ Estate	

5 Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address.**
Satamaradankatu 5

City or town, state or province. Include postal code where appropriate.
FI-00020 Nordea, Helsinki

Country
Finland

6 Business address in the United States (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address.**
1211 Avenue of the Americas, 23rd Fl

City or town, state, and ZIP code
New York, NY 10036

7 U.S. taxpayer identification number (required—see instructions) ☐ SSN or ITIN ☑ EIN **98-1337846**

8a Foreign tax identifying number (FTIN)
2858394-9

8b Check if FTIN not legally required ☐

9 Reference number(s) (see instructions)

10 Date of birth (MM-DD-YYYY)

11 Specify 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 business in the United States (attach statement if necessary). **Interest, fees, letter of credit fees, original issue discount income, dividends, rents, royalties and other fixed or determinable annual or periodic gains, profits and income from U.S. sources.**

12 Check 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 (PTP) 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 this form is effectively connected with the conduct of a trade or business within the United States without regard to section 864(c)(8). ☐

Part II Certification

Sign Here

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
- The beneficial owner is not a U.S. person.

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.**

Signature of beneficial owner (or individual authorized to sign for the beneficial owner)	Print name	Date (MM-DD-YYYY)
Bartosz Olejnik Service Operations Officer Nordea Bank Abp, Tax Reclaims	Monika Najgebauer Service Operations Officer Nordea Income FI & Tax Reclaims	09.03.2024