

ta collection. 2018 ANNUAL SURVEY OF U.S. DIRECT INVESTMENT ABROAD **MANDATORY — CONFIDENTIAL**

BE-11 Claim for Not Filing

Reporter I	D Num	shor*

BE-11A. If a Form BE-11A was not received, enter name and address.

*Do not enter Social Security Number in Reporter ID box

Mail reports to: Bureau of Economic Analysis

Direct Investment Division, BE-69(A)

4600 Silver Hill Road Washington, DC 20233

Deliver reports to: Bureau of Economic Analysis

Direct Investment Division, BE-69(A)

4600 Silver Hill Road Suitland, MD 20746

Fax reports to: (301) 278-9502

Assistance: E-mail:

Telephone: Copies of form: be10/11@bea.gov | 5 (301) 278-9/10 www.bea.gov/dia

Please include your Reporter Identification Number with all requests.

Name and address of U.S. business enterprise for which this claim is filed — If the enterprise received a Form BE-11A but is exempt from filing, enter below the Reporter name, address, and BEA assigned Identification Number (Reporter ID) from the preprinted information provided in Part I, 11, of Form

twww.bea.go Name and address of U.S. Reporter

The BE-11 Claim for Not Filing is to be completed and returned to BEA by May 31, 2019, by all persons, or their agents, who are contacted by BEA about reporting on this survey and are:

- 1) Exempt from filing all 2018 BE-11 forms complete Part I of the form; OR
- 2) Exempt from filing one or more of the 2018 BE-11B and/or BE-11C forms that they received from BEA complete Part II of the form.

See Instruction Booklet, Section 1.C., for exemption criteria.

CONTACT INFORMATION

Provide information of person to consult about this report:

0990	Name 0					
0991	Street 1			0994	Telephone Number	Extension
0992	Street 2 0			0997	Fax Number 0	
0993	City 0	State	Zip	0999	E-mail Address 0	

NOTE: BEA uses a Secure Messaging System to correspond with you via encrypted message to discuss questions relating to this form. We may use your e-mail address for survey-related announcements and to inform you about secure messages. When communicating with BEA by e-mail, please do not include any confidential business or personal information.

CERTIFICATION

The undersigned official certifies that this report has been prepared in accordance with the applicable instructions, is complete, and is substantially accurate except that, in accordance with instructions Part IV.E of the Instruction Booklet, estimates may have been provided.

	Signature of Authorized Official	Date	Telephone Number Extension	
0995	Name 0	Title	Fax Number 0	

BASIS OF CLAIM FOR NOT FILING

Mark (X) and complete either Part I or Part II

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A.	This U.S. person did not own or control, 10 percent or more of the voting securities of an incorporated foreign business enterprise, or an equivalent interest in an unincorporated foreign business enterprise (including a branch or real estate held for other than personal use) at the end of its 2018 fiscal year.						
	But did file the 2017 BE-11, Annual Survey of U.S. Direct Investment Abroad, with this Bureau.						
В.	This U.S. person did own or control, directly or indirectly, 10 percent or more of the voting securities of an incorporated foreign business enterprise, or an equivalent interest in an unincorporated foreign business enterprise (including a branch or real estate held for other than personal use) at the end of its 2018 fiscal year, but (Mark (X) one)						
	None of its foreign affiliates are required to be reported on Form BE-11B, BE-11C, or BE-11D because all affiliates are exempt. You must complete page 3 of this claim for those affiliates for which you received a preprinted form or those identified as required to file in the eFile system. See <i>Instruction Booklet</i> , Section I.C., for exemption criteria.						
	Is fully consolidated in the BE-11 report for another U.S. person – <i>Give name and address of that person and their BEA Identification Number, if known.</i> Name Address – <i>Number and street or P.O. Box</i>						
	City State ZIP Code BEA Identification Number						
c.	1 111 601 4 111						
Pai	Other – Specify and include reference to section of regulations or instructions on which claim is based. It is a section of regulations or instructions on which claim is based. It is a section of regulations or instructions on which claim is based.						
	Did this U.S. reporter have one or more foreign affiliates identified by BEA as required to file a 2018 BE-11B or BE-11C form but no longer meet one or both of the following two filing requirements at the end of its 2018 fiscal year: 1) the U.S. reporter no longer owns or controls, directly or indirectly, 10 percent or more of the voting securities of the incorporated foreign business enterprise (or an equivalent interest in an unincorporated foreign business enterprise), or/and 2) the sales, assets, and net income for this affiliate(s) are all \$60 million or less?						
	Yes — Please complete page 3 of this Claim form for each of these foreign affiliates. Do not list foreign affiliates that BEA did not identify to file.						
	Did this U.S. reporter own one or more foreign affiliates identified by BEA as required to file a 2018 BE-11B or BE-11C form but for which ALL of the following apply: 1) the foreign affiliate is a private fund, AND 2) the private fund foreign affiliate does not own, directly or indirectly through another business enterprise, an "operating company" – i.e., a business enterprise that is not a private fund or a holding company— in which the consolidated U.S. reporter owns at least 10 percent of the voting interest, AND 3) If the U.S. reporter owns the private fund indirectly (through one or more other business enterprises), there are no "operating companies" between the consolidated U.S. reporter and the indirectly-owned foreign private fund? For more information regarding private funds visit www.bea.gov/privatefunds .						
	Yes — Please complete page 3 of this Claim form for each of these foreign affiliates and check the corresponding box. The U.S. reporter's investment in the foreign private fund may be required to be reported on Treasury International Capital (TIC) surveys, review reporting requirements for TIC surveys at www.treasury.gov/tic . Do not list foreign affiliates that BEA did not identify to file.						
	² No						
MA	NDATORY — This survey is being conducted under the International Investment and Trade in Services Survey Act (PL 94-472 90 Stat 2059 22						

MANDATORY — This survey is being conducted under the International Investment and Trade in Services Survey Act (P.L. 94-472, 90 Stat. 2059, 22 U.S.C. 3101–3108, as amended – hereinafter "the Act"), and the filing of reports is mandatory under Section 5(b)(2) of the Act (22 U.S.C. 3104).

CONFIDENTIALITY — The Act provides that your report to this Bureau is CONFIDENTIAL and may be used only for analytical or statistical purposes. Without your prior written permission, the information filed in your report CANNOT be presented in a manner that allows it to be individually identified. Your report CANNOT be used for purposes of taxation, investigation, or regulation. Copies retained in your files are immune from legal process. Per the Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through security monitoring of the BEA information systems.

PENALTIES — Whoever fails to report shall be subject to a civil penalty of not less than \$4,619, and not more that \$46,192, and to injunctive relief commanding such person to comply, or both. Whoever willfully fails to report shall be fined not more than \$10,000 and, if an individual, may be imprisoned for not more than one year, or both. Any officer, director, employee, or agent of any corporation who knowingly participates in such violations, upon conviction, may be punished by a like fine, imprisonment, or both (22 U.S.C. 3105). These civil penalties are subject to inflationary adjustments. Those adjustments are found in 15 C.F.R. 6.4.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

received preprinted forms. Copy the foreign affiliate name and Affiliate ID from system and complete the remaining items.	n the preprinted form or those identified as re	quired	to file	in the eFile	e
1 Name of foreign affiliate:	a. Percent ownership at close of		(ctio	(1.
	fiscal year 2018 — Enter to the nearest tenth of one percent		46	<u> </u>	_ %
	data	\$ Bil.	. Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on	c. Annual sales or gross operating revenues, excluding sales taxes				000
page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT	1011				000
2 Name of foreign affiliate:	a. Percent ownership at close of				
MNE rica	fiscal year 2018 — Enter to the nearest tenth of one percent			_ · _	_ %
u.S. history	per	\$ Bil.	. Mil.	Thous.	Dols.
Affiliate ID: Affiliate ID: This points first of affiliate to the execution stated on	b. Total assets — Balance at close of fiscal year				000
This private fund anniate nieets the exemption chiena stated on	c. Annual sales or gross operating revenues, excluding sales taxes				000
page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete ad.	d. Net income (loss)				000
3 Name of foreign affiliate:	a. Percent ownership at close of fiscal year 2018 — Enter to the				%
3 Name of foreign affiliate:	nearest tenth of one percent			·	_ /0
		\$ Bil.	. Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on	c. Annual sales or gross operating revenues, excluding sales taxes				000
page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete ad.	d. Net income (loss)				000
4 Name of foreign affiliate:	a. Percent ownership at close of fiscal year 2018 — Enter to the				0/
	nearest tenth of one percent			_ · _	_ %
		\$ Bil.	. Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on	c. Annual sales or gross operating revenues, excluding sales taxes				000
page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete ad.	d. Net income (loss)				000
5 Name of foreign affiliate:	a. Percent ownership at close of fiscal year 2018 — Enter to the				%
	nearest tenth of one percent				_ , ~
		\$ Bil.	. Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on	c. Annual sales or gross operating revenues, excluding sales taxes	_			000
page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete ad.	d. Net income (loss)				000

If you are claiming exemption based upon the criteria on page 2, Part I B.1 or Part II, complete the items below for those affiliates for which you

If you are claiming exemption based upon the criteria on page 2, B.1 or Part received preprinted forms. Copy the affiliate name and Affiliate ID from the p eFile system and complete the remaining items.				u	0.
6 Name of foreign affiliate:	Percent ownership at close of fiscal year 2018 — Enter to the nearest tenth of one percent		/e	ctio	_ %
Affiliate ID:	b. Total assets — Balance at	\$ Bil.	Mil.	Thous.	
7.11.11.11.11	close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT	c. Annual sales or gross operating revenues, excluding sales taxes				000
complete ad.	d. Net income (loss)				000
Name of foreign affiliate:	a. Percent ownership at close of fiscal year 2018 — Enter to the nearest tenth of one percent				_ %
complete ad. 7 Name of foreign affiliate: Affiliate ID: This private fund affiliate meets the exemption criteria stated on page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT	b Tatalogue Balance et	\$ Bil.	Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete ad.					000
EO. Mr.	d. Net income (loss)				000
8 Name of foreign affiliate:	a. Percent ownership at close of fiscal year 2018 — Enter to the nearest tenth of one percent				_ %
FII.		\$ Bil.	Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete ad.	c. Annual sales or gross operating revenues, excluding sales taxes				000
9 Name of foreign affiliate:	d. Net income (loss)				000
rano di biognanimate.	Percent ownership at close of fiscal year 2018 — Enter to the nearest tenth of one percent			_ · _	_ %
		\$ Bil.	Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete ad.	c. Annual sales or gross operating revenues, excluding sales taxes				000
10 Name of foreign affiliate:	A. Net income (loss) a. Percent ownership at close of				000
	fiscal year 2018 — Enter to the nearest tenth of one percent			_ · _	_ %
		\$ Bil.	Mil.	Thous.	Dols.
Affiliate ID:	b. Total assets — Balance at close of fiscal year				000
This private fund affiliate meets the exemption criteria stated on page 2, Part II. B. (Answer to Part II. B has to be 'Yes'.) DO NOT complete a – d	c. Annual sales or gross operating revenues, excluding sales taxes				000
complete ad.	d. Net income (loss)				000
Additional foreign affiliates should be reported	d on additional copied sheets.				