

## 2022 ANNUAL SURVEY OF U.S. DIRECT INVESTMENT ABROAD MANDATORY — CONFIDENTIAL

## **BE-11 Claim for Not Filing**

				Reporter ID Number* *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  Bureau of Economic Analysis Direct Investment Division, BE-69(A) 4600 Silver Hill Road Suitland, MD 20746			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 of Form BE-11A. If a Form BE-11A was not received, enter name and address.				
Deliver reports to:			900	Name of U.S. Reporter:				
Fax reports to:	(301) 278-9502		900	0 c/o (care of):				
Assistance:	E-mail: Telephone: Copies of form:	be10/11@bea.gov (301) 278-9418 www.bea.gov/dia	900	0 City 900 State 900 Zip				
Please include you	r Reporter Ident	ification Number						
by BEA about reportin  1) Exempt from filing  2) Exempt from filing  See <i>Instruction Bo</i>	ng on this survey an all 2022 BE-11 form one or more of the poklet, Part 1.C., for the poklet and the poklet are the poklet and the poklet are the poklet ar	nd are: ns — complete Part I of 2022 BE-11B and/or E or exemption criteria.	SE-1	11C forms that they received from BEA — complete Part II of the form.				
Name	on of person to	consult about this	s re	eport:				
Street 1 0				Telephone Number Extension				
Street 2 0				Fax Number  0 ()				
City 0	:	State Zip		E-mail Address				
NOTE: BEA uses a S your e-mail address fo please do not incl	or survey-related ar ude any confide	nnouncements and to i	infori <b>per</b>	h you via encrypted message to discuss questions relating to this form. We may use rm you about secure messages. When communicating with BEA by e-mail, rsonal information. This includes your Social Security Number which				

## **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
			0996		
	Name	Title		Fax Number	
0995	0		1001	°()	

## BASIS OF CLAIM FOR NOT FILING

Mark (X) and complete either Part I or Part II								
Part I.	Basis of Claim for Not Filing BE-11 Forms							
1002								
A. <sup>1</sup> 1	<sup>1</sup> This U.S. person did <b>not</b> 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 2022 fiscal year.							
	<sup>2</sup> <b>1</b> But <i>did</i> file the 2021 BE-11, Annual Survey of U.S. Direct Investment Abroad, with this Bureau.							
B. 12 This U.S. person <b>did</b> 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 2022 fiscal year, but (Mark (X) one) —								
	<sup>3</sup> 1 None of its foreign affiliates are required to be	e reported on Form BE-11B, BE-11C, or BE-11D becar	use all affiliates	are exempt.				
		aim for those affiliates for which you receive ile system. See <i>Instruction Booklet, Part I.C.</i> ,						
	<sup>3</sup> 2 Is fully consolidated in the BE-11 report for another U.S. person – <i>Give name and</i>	Name						
	address of that person and their BEA Identification Number, if known.	Address – Number and street or P.O. Box						
		City	State	ZIP Code				
		BEA Identification Number	+2 CO					
<b>C.</b> <sup>1</sup> 3	City  BEA Identification Number  BEA Identification Number  C. 13 Other – Specify and include reference to section of regulations or instructions on which claim is based  Part II. Basis of Claim for Not Filing for Foreign Affiliate(s)  A. Did this U.S. reporter have one or more foreign affiliates identified by BEA as required to file a 2022 BE-11B or BE-11C form but no longer meet one or both of the following two filing requirements at the end of its 2022 iscal year: 1) the U.S. reporter no longer owns or controls (i.e., foreign affiliate was liquidated or sold), directly or indirectly, 10 percent or more of the voting securities of the incorporated foreign business enterprise) and/or 2) the sales, assets, and net income (loss) for this affiliate(s) are all \$60 million or less?							
Part II.	Basis of Claim for Not Filing for Foreign Aff	filiate(s)						
A. Did to or book liquid inter	this U.S. reporter have one or more foreign affiliates ident of the following two filing requirements at the end of dated or sold), directly or indirectly, 10 percent or more dest in an unincorporated foreign business enterprise), a Yes — Please complete page 3 of this Clair	ntified by BEA as <b>required</b> to file a 2022 BE-11B or BI its 2022 fiscal year: 1) the U.S. reporter no longer owns of the voting securities of the incorporated foreign busin and/or 2) the sales, assets, and net income (loss) for this more for each of these foreign affiliates.	s or controls (i.e. less enterprise	., foreign affiliate was (or an equivalent				
B. Did through the co	Do not list foreign affiliates that BEA did not in No  this U.S. reporter own one or more foreign affiliates ide the ALL of the following apply: 1) the foreign affiliate is a ugh another business enterprise, an "operating compa consolidated U.S. reporter owns at least 10 percent of		e does not own, nd or a holding he private fund	directly or indirectly company— in which indirectly (through				

private fund? For more information regarding private funds visit www.bea.gov/privatefunds. 1004 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.

<sup>1</sup>**2** No

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 and to injunctive relief commanding such person to comply, or both. Whoever willfully fails to report shall be fined 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. 6.3.

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.

	If you are claiming exemption based upon the criteria on page 2, Part I B.2(1 received preprinted forms. Copy the foreign affiliate name and Affiliate ID from system and complete the remaining items.			
5001 <b>1</b>	<b>-</b> U	a. Percent ownership at close of fiscal year 2022 — Enter to the nearest tenth of one percent	4 ·_	_ %
	<sup>1</sup> Affiliate ID:	<b>b.</b> Total assets — <i>Balance at close of fiscal year</i>	\$ Bil. Mil. Thous.	Dols.
<sup>2</sup> 1	Sales, assets, and net income for this affiliate are all \$60 million or less. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) <b>Complete a.–d.</b>	c. Annual sales or gross operating revenues, excluding sales taxes  d. Net income (loss)	7	000
<sup>2</sup> 2 <sup>2</sup> 3	This affiliate was liquidated, seized, or the U.S. reporter's direct and indire as of <sup>3</sup> // As stated on page 2, Part II A. (Answer to Part II. A	ect ownership interest in the affiliate otherwise has to be 'Yes'.) DO NOT complete ad.	e fell below 10 percent	d.
	8 Name: 9 Address: NINE 2022-P	reliminary		
5002 2 2 1	In affiliate was sold on "/ As stated on page 2, Part II A. (A lf it was sold to another U.S. entity, provide name and contact information  8 Name:  9 Address:  Affiliate ID:  Sales, assets, and net income for this affiliate are all \$60 million or less. As stated on page 2, Part II A. (Answer to Part II. A has to be Yes.) Complete a.—d.	a. Percent ownership at close of fiscal year 2022 — Enter to the nearest tenth of one percent	7	000
<sup>2</sup> 2	This private fund affiliate meets the exemption criteria stated on page 2, F	Part II. B. (Answer to Part II. B has to be 'Yes'.)	DO NOT complete a	000 -d.
<sup>2</sup> 4	as of <sup>3</sup> / As stated on page 2, Part II A. (Answer to Part II. A	has to be 'Yes'.) <b>DO NOT complete a d.</b> Answer to Part II. A has to be 'Yes'.) <b>DO NOT</b> of	·	

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system and complete the remaining items. Name of foreign affiliate: Percent ownership at close of fiscal year 2022 — Enter to the % nearest tenth of one percent . . . . \$ Bil. Mil. Thous. Dols. **b.** Total assets — Balance at <sup>1</sup> Affiliate ID: 000 close of fiscal year . . . . . . . . . c. Annual sales or gross operating Sales, assets, and net income for this affiliate are all \$60 million 000 revenues, excluding sales taxes. . or less. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) Complete a.-d. d. Net income (loss)..... 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. <sup>2</sup>3 This affiliate was liquidated, seized, or the U.S. reporter's direct and indirect ownership interest in the affiliate otherwise fell below 10 percent as of <sup>3</sup> \_\_/\_/\_\_. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.-d.** This affiliate was sold on 3 \_\_/\_/\_\_ . As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.-d.** ats and net income stated on par
Complete State of the If it was sold to another U.S. entity, provide name and contact information for the new owner. <sup>8</sup> Name: 9 Address: 5004 Name of foreign affiliate: % nearest tenth of one percent . . . \$ Bil. Mil. Thous. Dols. 000 **c.** Annual sales or gross operating revenues, excluding sales taxes. Sales, assets, and net income for this affiliate are all \$60 million 000 or less. As stated on page 2, Part II A. (Answer to Part II. A has to be Yes.) Complete a.-d. d. Net income (loss)..... 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. This affiliate was liquidated, seized, or the U.S. reporter's direct and indirect ownership interest in the affiliate otherwise fell below 10 percent as of <sup>3</sup> \_\_/\_/\_\_. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.-d.** This affiliate was sold on 3 \_\_/\_\_\_. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.-d.** If it was sold to another U.S. entity, provide name and contact information for the new owner. <sup>8</sup> Name: 9 Address:

If you are claiming exemption based upon the criteria on page 2, Part I B.2(1) or Part II, complete the items below for those affiliates for which you received preprinted forms. Copy the foreign affiliate name and Affiliate ID from the preprinted form or those identified as required to file in the eFile

If you are claiming exemption based upon the criteria on page 2, Part I is received preprinted forms. Copy the foreign affiliate name and Affiliate II system and complete the remaining items.			
5005 Name of foreign affiliate:	<b>a.</b> Percent ownership at close of fiscal year 2022 — Enter to the nearest tenth of one percent	·	_ %
<sup>1</sup> Affiliate ID:	<b>b.</b> Total assets — Balance at close of fiscal year.	\$ Bil. Mil. Thous.	Dols.
Sales, assets, and net income for this affiliate are all \$60 million or less. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) Complete ad.	c. Annual sales or gross operating revenues, excluding sales taxes	7	000
<ul> <li>This private fund affiliate meets the exemption criteria stated on page</li> <li>This affiliate was liquidated, seized, or the U.S. reporter's direct and as of <sup>3</sup>_/_/ As stated on page 2, Part II A. (Answer to Part</li> <li>This affiliate was sold on <sup>3</sup>_/_/ As stated on page 2, Part II If it was sold to another U.S. entity, provide name and contact information.</li> </ul>	pe 2, Part II. B. (Answer to Part II. B has to be 'Yes' indirect ownership interest in the affiliate otherwise II. A has to be 'Yes'.) <b>DO NOT complete ad.</b>	e fell below 10 percent	
8 Name: 9 Address:	al record.		
If it was sold to another U.S. entity, provide name and contact inform.  8 Name:  9 Address:  Affiliate ID:  Affiliate ID:  2 Affiliate ID:  Affiliate ID:  Affiliate ID:  Affiliate ID:  Complete ad.	a. Percent ownership at close of fiscal year 2022 — Enter to the nearest tenth of one percent	7	% Dols. 000 000
<ul> <li>This private fund affiliate meets the exemption criteria stated on page 2.</li> <li>This affiliate was liquidated, seized, or the U.S. reporter's direct and as of 3/_/ As stated on page 2, Part II A. (Answer to Part</li></ul>	indirect ownership interest in the affiliate otherwise II. A has to be 'Yes'.) <b>DO NOT complete ad.</b> I A. (Answer to Part II. A has to be 'Yes'.) <b>DO NOT</b>	se fell below 10 percent	- d.
<sup>8</sup> Name: <sup>9</sup> Address:			

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	system and complete the remaining items.						
5007 <b>7</b>	Name of foreign affiliate:	a.	Percent ownership at close of fiscal year 2022 — Enter to the nearest tenth of one percent	4		_ · _	_ %
	<sup>1</sup> Affiliate ID:	b.	Total assets — Balance at	5	Mil.	Thous.	Dols.
			close of fiscal year	6			000
<sup>2</sup> <b>1</b>	Sales, assets, and net income for this affiliate are all \$60 million or less. As stated on page 2, Part II A. (Answer to Part II. A has		revenues, excluding sales taxes	7			000
	to be 'Yes'.) Complete ad.	d.	Net income (loss)				000
<sup>2</sup> <b>2</b>	This private fund affiliate meets the exemption criteria stated on page 2, P	Part	II. B. (Answer to Part II. B has to be 'Yes'.	) DO NO	OT com	nplete a	-d.
<sup>2</sup> 3	This affiliate was liquidated, seized, or the U.S. reporter's direct and indire as of $^3$ /_/ As stated on page 2, Part II A. (Answer to Part II. A h		•	e fell bel	ow 10	percent	•
<sup>2</sup> <b>4</b>	This affiliate was sold on <sup>3</sup> / As stated on page 2, Part II A. (A If it was sold to another U.S. entity, provide name and contact information	Answ for t	ver to Part II. A has to be 'Yes'.) <b>DO NOT</b> the new owner.	comple	te a.– c	d.	
	<sup>8</sup> Name:		inary				
	<sup>9</sup> Address:		imilia				
	0.8	1	surd.				
	202	*	scor Ildia.				
	MNE torical	7	3a.gov				
5008	In satisfilate was sold on " _ / As stated on page 2, Part II A. (A lf it was sold to another U.S. entity, provide name and contact information 8 Name:  9 Address:  Affiliate ID:  Sales, assets, and net income for this affiliate are all \$60 million or less. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) Complete a.—d.  This affiliate was liquidated, seized, or the U.S. reporter's direct and indire as of 3 _ / _ / . As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.)  This affiliate was sold on 3 / / . As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.)	a.	Percent ownership at close of fiscal year 2022 — Enter to the nearest tenth of one percent	4		_ · _	_ %
	used here ims a			\$ Bil.	Mil.	Thous.	Dols.
	Affiliate ID: 2460	b.	Total assets — Balance at	5			
Y	Service In the Inches		close of fiscal year	6			000
<sup>2</sup> <b>1</b>	Sales, assets, and net income for this affiliate are all \$60 million or less. As stated on page 2, Part II A. (Answer to Part II. A has	C.	revenues, excluding sales taxes	7			000
	to be Yes:) Complete ad.	d.	Net income (loss)	. ′			000
<sup>2</sup> <b>2</b>	This private fund affiliate meets the exemption criteria stated on page 2, P	Part	II. B. (Answer to Part II. B has to be 'Yes'.	) DO NO	OT con	nplete a	-d.
<sup>2</sup> 3	This affiliate was liquidated, seized, or the U.S. reporter's direct and indire as of $^3$ _/_/ As stated on page 2, Part II A. (Answer to Part II. A h	ect o	wnership interest in the affiliate otherwise to be 'Yes'.) <b>DO NOT complete ad.</b>	e fell bel	ow 10 j	percent	
<sup>2</sup> <b>4</b>	This affiliate was sold on $\frac{3}{2}$ . As stated on page 2, Part II A. (A If it was sold to another U.S. entity, provide name and contact information		101 to 1 art 111.71 has to be 100.1, <b>20 1101</b>	comple	te ad	d.	
	<sup>8</sup> Name:						
	<sup>9</sup> Address:						

If you are claiming exemption based upon the criteria on page 2, Part I B.2(1) or Part II, complete the items below for those affiliates for which you received preprinted forms. Copy the foreign affiliate name and Affiliate ID from the preprinted form or those identified as required to file in the eFile

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