Bureau of Economic Analysis
U.S. DEPARTMENT OF COMMERCE

2023 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

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: **be10/11@bea.gov**
Telephone: (301) 278-9418
Copies of form: **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 **1** of Form BE-11A. If a Form BE-11A was not received, enter name and address.

900 Name of U.S. Reporter: 1

900 c/o (care of): 2

900 Street/P.O. Box: 3

900 City 4 | 900 State 5 | 900 Zip 6

Form used in U.S. MNE 2023-Revised data collection.
Presented here for historical record.
Find current forms at www.bea.gov/dia.

The **BE-11 Claim for Not Filing** is to be completed and returned to BEA by May 31, 2024, by all persons, or their agents, who are contacted by BEA about reporting on this survey and are:

1) Exempt from filing all 2023 BE-11 forms — *complete Part I of the form;* OR

2) Exempt from filing one or more of the 2023 BE-11B and/or BE-11C forms that they received from BEA — *complete Part II of the form.*

See ***Instruction Booklet**, Part I.C.,* for exemption criteria.

CONTACT INFORMATION

Provide information of person to consult about this report:

0990 Name 0

0991 Street 1 0

0992 Street 2 0

0993 City 0 | State | Zip

0994 Telephone Number 0 ( ) – | Extension

0997 Fax Number 0 ( ) –

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. This includes your Social Security Number which should never be provided to BEA via any method of transmission.**

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.

0995 Signature of Authorized Official | Date

Name 0 | Title

0996 Telephone Number 0 ( ) – | Extension

1001 Fax Number 0 ( ) –

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. [1] **1** ☐ 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 2023 fiscal year.

[2] **1** ☐ But *did* file the 2022 BE-11, Annual Survey of U.S. Direct Investment Abroad, with this Bureau.

B. [1] **2** ☐ 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 2023 fiscal year, but *(Mark (X) one)* —

[3] **1** ☐ 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 ***Instruction Booklet,*** *Part I.C.,* for exemption criteria.

[3] **2** ☐ Is fully consolidated in the BE-11 report for another U.S. person – *Give name and address of that person and their BEA Identification Number, if known.* →

Name		
Address – *Number and street or P.O. Box*		
City	State	ZIP Code
BEA Identification Number →		

C. [1] **3** ☐ 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 2023 BE-11B or BE-11C form but no longer meet one or both of the following two filing requirements at the end of its 2023 fiscal 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 (or an equivalent interest in an unincorporated foreign business enterprise), and/or 2) the sales, assets, and net income (loss) for this affiliate(s) are all $60 million or less?

1003

[1] **1** ☐ 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.

[1] **2** ☐ No

B. Did this U.S. reporter own one or more foreign affiliates identified by BEA as **required** to file a 2023 BE-11B, BE-11C or BE-11D 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**.

1004

[1] **1** ☐ 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.

[1] **2** ☐ No

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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) 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 system and complete the remaining items.

5001

1 [0] Name of foreign affiliate:

[1] Affiliate ID:

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year*	[5]			000
c. Annual sales or gross operating revenues, excluding sales taxes	[6]			000
d. Net income (loss)	[7]			000

[2] **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'.) **Complete a.–d.**

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] Name:

[9] Address:

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5002

2 [0] Name of foreign affiliate:

[1] Affiliate ID:

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year*	[5]			000
c. Annual sales or gross operating revenues, excluding sales taxes	[6]			000
d. Net income (loss)	[7]			000

[2] **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'.) **Complete a.–d.**

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] 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 system and complete the remaining items.

5003
3 [0] Name of foreign affiliate:

[1] Affiliate ID:

[2] **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'.) **Complete a.–d.**

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year*	[5]			000
c. Annual sales or gross operating revenues, excluding sales taxes	[6]			000
d. Net income (loss)	[7]			000

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] Name:

[9] Address:

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5004
4 [0] Name of foreign affiliate:

[1] Affiliate ID:

[2] **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'.) **Complete a.–d.**

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year*	[5]			000
c. Annual sales or gross operating revenues, excluding sales taxes	[6]			000
d. Net income (loss)	[7]			000

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] 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 system and complete the remaining items.

5005
5 [0] Name of foreign affiliate:

[1] Affiliate ID:

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year*	[5]			000
c. Annual sales or gross operating revenues, excluding sales taxes	[6]			000
d. Net income (loss)	[7]			000

[2] **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'.) **Complete a.–d.**

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] Name:

[9] Address:

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5006
6 [0] Name of foreign affiliate:

[1] Affiliate ID:

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year*	[5]			000
c. Annual sales or gross operating revenues, excluding sales taxes	[6]			000
d. Net income (loss)	[7]			000

[2] **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'.) **Complete a.–d.**

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] 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 system and complete the remaining items.

5007
7 [0] Name of foreign affiliate:

[1] Affiliate ID:

[2] **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'.) **Complete a.–d.**

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year* . . . . . [5]				000
c. Annual sales or gross operating revenues, excluding sales taxes . . . . . [6]				000
d. Net income (loss) . . . . . [7]				000

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] Name:

[9] Address:

5008
8 [0] Name of foreign affiliate:

[1] Affiliate ID:

[2] **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'.) **Complete a.–d.**

a. Percent ownership at close of fiscal year 2023 — *Enter to the nearest tenth of one percent* . . . . . [4] ___ ___ ___ . ___ %

	$ Bil.	Mil.	Thous.	Dols.
b. Total assets — *Balance at close of fiscal year* . . . . . [5]				000
c. Annual sales or gross operating revenues, excluding sales taxes . . . . . [6]				000
d. Net income (loss) . . . . . [7]				000

[2] **2** ☐ 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.**

[2] **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 [3] __/__/____. As stated on page 2, Part II A. (Answer to Part II. A has to be 'Yes'.) **DO NOT complete a.–d.**

[2] **4** ☐ 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.

[8] Name:

[9] Address:

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