Form W-8BEN

(Rev. October 2021)

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E.

► Go to www.irs.gov/FormW8BEN for instructions and the latest information.

OMB No. 1545-1621

Departm Internal	nent of the Treasury Revenue Service	Go to www.irs.gov/FormW8BEN Give this form to the withholding				
Do NO	T use this form i	if:			Instead, use Form	
• You a	are NOT an individ	dual		* * * * * * * *	W-8BEN-E	
• You a	are a U.S. citizen	or other U.S. person, including a resident alien	individual	2 2 2 2 2 2 2 2 2 2 2	W-9	
	are a beneficial over than personal s	wner claiming that income is effectively connec ervices)	ted with the conduct of tr	ade or business within the U	Inited States W-8EC	
• You a	are a beneficial ov	wner who is receiving compensation for person	al services performed in t	he United States	8233 or W-4	
		ng as an intermediary		* * * * * * * *	W-8IM	
		nt in a FATCA partner jurisdiction (that is, a Mo ction of residence.	odel 1 IGA jurisdiction wit	h reciprocity), certain tax ac	count information may be	
Part		cation of Beneficial Owner (see instr	ructions)			
1	Name of individual who is the beneficial owner			2 Country of citizenship		
3	Permanent resid	dence address (street, apt. or suite no., or rural	route). Do not use a P.O.	box or in-care-of address.	•	
	City or town, state or province. Include postal code where a		ropriate.	Country		
4	Mailing address	(if different from above)		+		
	City or town, sta	ate or province. Include postal code where appr	ropriate.	Country		
5	U.S. taxpayer id	axpayer identification number (SSN or ITIN), if required (see instructions)				
6a	Foreign tax iden	ntifying number (see instructions)	6b Check if FTIN not legally required			
7	Reference number(s) (see instructions) 8 Date of birth (MM-DD-YYYYY) (see instructions)					
		The state of the s				
Par	TATAL TRANSPORT OF THE PARTY OF	of Tax Treaty Benefits (for chapter 3 p	ourposes only) (see in			
9		beneficial owner is a resident of		within the m	neaning of the income tax	
10		treaty between the United States and that country. Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph				
10	of the treaty identified on line 9 above to claim a % rate of withholding on (specify type of income):					
	76 rate treaty identified on line 3 above to daint a 76 rate of withflording on (specify type of income):					
	Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding:					
Part	III Certific	ation				
Under pe	enalties of perjury, I decl	lare that I have examined the information on this form and to the b	est of my knowledge and belief it is	true, correct, and complete. I further ce	ertify under penalties of perjury that:	
		s the beneficial owner (or am authorized to sign for the form to document myself for chapter 4 purposes;	individual that is the beneficia	l owner) of all the income or prod	eeds to which this form	
	8	e 1 of this form is not a U.S. person;				
	form relates to:					
	THE CASE CONTRACTOR OF THE CONTRACTOR	connected with the conduct of a trade or business in				
	and the second s	nnected with the conduct of a trade or business in the		ct to tax under an applicable inco	ome tax treaty;	
	The state of the same of the s	a partnership's effectively connected taxable income;		1440(0-		
		realized from the transfer of a partnership interest subj			المنا	
		of this form is a resident of the treaty country listed on line 9 of the or barter exchanges, the beneficial owner is an exempt			filled States and trial country, and	
Furthern	nore, I authorize this fo	orm to be provided to any withholding agent that has control, the income of which I am the beneficial owner. I agree that I	receipt, or custody of the income	of which I am the beneficial owner o	r any withholding agent that can n this form becomes incorrect.	
		I certify that I have the capacity to sign for the person				
oign	Here					
		Signature of beneficial owner (or individual autho	orized to sign for beneficial ow	ner) Date	(MM-DD-YYYY)	
	Victoria.	t name of signer				
For Pa	aperwork Reduct	tion Act Notice, see separate instructions.	Cat. No. 25	047Z Form	W-8BEN (Rev. 10-2021)	

請確認版本

除簽名處得以中文表示,其他內容請以英文填寫

Form W-8BEN

倘符合以下情況請勿使用本表格:

Rev. October 2021)

Department of the Treasury Internal Revenue Service

在美國課稅及申報目的下之最終受益人外國身分證明 (個人)

▶提供個人使用。非個人須使用 W-8BEN-E 表格。

►W-8BEN 表格及其最新說明公佈於 www.irs.gov/FormW8BEN. →請將此表格交予扣繳義務人或付款人·勿直接交予 IRS。

OMB No. 1545-1621

應使用之表格:

非個人者·····→應使用 W-8BEN-E						
美國公民或其他美國人士(包含個人外籍居民) · · · · · · · · · · · · · · · · · · ·						
收入可與美國境內交易或業務行為(個人服務除外)有效連結的最終受益人····································						
收受美國境內個人服務報酬的最終受益人・・・・・・・・・・・・・・・・・→應使用 8233 或 W-4						
擔任中間人角色者····→應使用 W-8IMY						
備註:倘若為 FATCA 夥伴國(如:簽訂 Model I 跨政府協議之司法管轄區)之居民,特定稅務帳戶資訊可能會提供予						
您身為稅務居民之司法管轄區。						
Part I 最終受益人身份 (詳見說明)						
1. 最終受益人姓名	2. 國籍					
(必填)	(必填)					
3. 永久居住地址(填寫完整的街道地址,)。勿使用郵政 <mark>信箱或轉</mark> 信地址。						
(必填・不得填寫郵政信箱或轉信地址)						
填寫城市或城鎮、州或省,包括郵政編碼	國籍					
(必填)	(必填)					
4. 郵寄地址(如與永久居住地址不同)						
(非必填·若與第3欄之永久居住地址不同時·請填寫)						
填寫城市或城鎮、州或省,包括郵政編碼	國籍					
(非必填)	(非必填)					
5. 如需要(詳見說明)·填寫美國稅籍編號 (SSN 或 ITIN)						
6a 外國稅務識別碼(詳見 <mark>說明)</mark>	6b 若當地法令未強制要求須取得外國稅 🗌					
(必填)	務識別碼·則勾選此欄					
	如不具 6a 應填之 FTIN ·則必勾選此欄					
7. 參考編號 (詳見說明)	8. 出生日期(月-日-年)(詳見說明)					
	(必填)					
和稅協議利益之主張(僅依第3章目的填寫)(詳見說明) - 非政境、海系が東京中港和稅投業原東時大東東東海 PARTIL 和稅投業國家見作東京的稅稅 西北國籍						
手必填,後安託各户中胡惟忧励俄陵思时才而安填為 PARIII,惟忧励俄幽多定拍各户的忧藉,则非幽精						
9. 本人聲明最終受益人係與美國簽訂租稅協議國家	之居民。					
10. 特別稅率與條件 (如適用·參見說明): 受益人主張依上述第九點之協議第條與段落之規定·要求以%						
税率扣繳(說明收入類型)。						
解釋最終受益人在條款與段落規定下能適用此扣繳稅率之額外條件:						
Part III 聲明						
在知悉偽證罪之懲罰下·本人聲明:本人已盡力檢查本表格之資訊·並相信上開資訊係真實、正確且完整。本人進一						
世界的						
● 本人為此表格涉及之所有收入或利益之個人最 <mark>終受益人(或被個</mark> 人最終受益人所授權簽署的個人)·或針對第四章						
目的用本表格證明本人身分狀態;						
● 本表第 1 點所列之人並非美國人士;						
● 本表涉及之收入:						
(a) 未與美國境內交易或業務行為有效連結;						
(b) 可有效連結但在適用的租稅協議下免稅;						
(c) 徐屬與合夥關係有效連結之收入中 合夥人的持份;或						
(d) 適用於第 1446(f)節扣繳規定,合夥人因合夥企業權益移轉而實現之金額。						
● 本表格第1點所列之最終受益人為第9點列示與美國簽訂租稅協議國家之居民;且						
● 在經紀交易或以物易物狀況中・最終受益人為本表說明中所定義之免受扣繳的外國人士。 						
此外・本人授權將此表格提供給對最終受益人為本人之收入・可控制、接收或保管的扣繳義務人・或可發放或支付最 8名 大ちました。						
終受益人為本人之收入的扣繳義務人。 若本表格之聲明已不正確·本人將同意於 30 天內提交一新表格。						
Sign Here 必填,可簽署中文姓名/英文姓名(同護照姓名) 必填,簽署日期						
最終受益人(或被最終受益人授權簽署之個人)之簽名 日期(月-日-年)						
	1					

※中文譯本由遠智證券股份有限公司翻譯,僅係為方便閱讀者了解原始文件內容所提供,該譯文並未經由美國國稅 局 IRS)或其他相關美國主管機關檢視與核可,倘與原文文意有所出入,敬請以原文為準。2023.06

簽署人行事之身分(如表格非由最終受益人簽署)

簽署人姓名完整拼音