## Form W-8BEN

(Rev. July 2017)

Department of the Treasury Internal Revenue Service

W-8BEN <sub>表格</sub>

(於 2017 年 7 月修訂) 美國財政部國家稅務局

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

美國預扣稅及申報實益擁有人之外籍身分證明(個人)

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

供個人使用。實體必須使用 W-8BEN-E 表格。

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

相關指引及最新資料請查閱 www.irs.gov/FormW8BEN。

 $\mbox{\Large \blacktriangleright}$  Give this form to the withholding agent or payer. Do not send to the IRS.

向預扣代理或付款人提交此表格。請勿發送給國稅局。

► All responses must be written in English.

必須全部以英文填寫。

OMB No. 1545-1621

美國管理預算局(OMB)號碼. 1545-1621

			1	•
	ise this form if: 情况,請勿使用此表格:	<b>A</b>		Instead, use Form: 請使用表格:
• You are	NOT an individual			W-8BEN-E
您並非何	固人	X.,		W-8BEN-E
• You are	a U.S. citizen or other U.S. person, including a	resident alien individual		W-9
您是美國	公民或其他美國人士,包括外籍個人居民			W-9
(other th	a beneficial owner claiming that income is effection personal services)		ade or business within the U.S.	
您作為)	· · · · · · · · · · · · · · · · · · ·	務(個人服務除外)實際相關		W-8ECI
<ul> <li>You are</li> </ul>	a beneficial owner who is receiving compensa	tion for personal services performed in	the United States	8233 or W-4
您作為[	『益擁有人,收取於美國進行的個人服務報酬			8233 or W-4
• You are	a person acting as an intermediary	7 ////		W-8IMY
您是擔任	中介機構之個人或組織		\-\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	W-8IMY
	N. Carlotte and Ca	Y		
to your ju	rou are resident in a FATCA partner jurisdiction risdiction of residence. 果您是 FATCA 合作司法管轄區(即簽訂互惠原 。			
Part		vner (see instructions)		
第一部	實益擁有人身分(請參閱指引)			
1	Name of individual who is the beneficial owne 實益擁有人的姓名		2 Country of citizenship 所屬國家公民	
3	Permanent residence address (street, apt. or	suite no., or rural route). Do not use a	P.O. box or in-care-of addres	s.
4	永久居住地址(街道、公寓或房號,或鄉郊郵	遞路線)。請勿使用郵政信箱或代收地均	£ •	
	City or town, state or province. Include postal	code where appropriate.	Country	
	城市或城鎮、州或省。 如適用,請填寫郵政編		國家	
4	Mailing address (if different from above)		·	
	郵寄地址(若與上述不同)			
	City or town, state or province. Include postal	code where appropriate.	Country	
	城市或城鎮、州或省。 如適用,填寫郵政編號		國家	
		_		
5	U.S. taxpaver identification number (SSN or I	TIN), if required (see instructions)	6 Foreign tax identifying	number (see instructions)
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions) 6 Foreign tax identifying nur 美國納稅人識別號碼(社會保障號碼或個人納稅人識別號碼),如需要(請參閱指 外國稅務識別號碼(請參修				
引)。	NEWALL COMMITTEE STATE OF STAT	NO (1997) 1991-19 / NO (1915) NO (1915)		
7	Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY)	(see instructions)	
•	参考號碼(請參閱指引)	出生日期 (月月-日日-年年年		

Part 第Ⅱ	Claim of Tax Troaty Dononie (10) onaptor	, , ,			
9		within the meaning of the income tax			
10	本人證明,實益擁有人為美國與 Special rates and conditions (if applicable—see instructions	簽署的所得稅協定涵義內的該國居民。 ): The beneficial owner is claiming the provisions of Article and paragraph % rate of withholding 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:				
	特別稅率及條件(如適用一請參閱指引):實益擁有人正根據上 百分比 (%) 的預扣稅: 說明實益擁有人根據條款適用該預扣稅率所符合的其他條件:				
Part l ∄ III ∺	Certification 證明	XA			
ify unde	er penalties of perjury that:	m and to the best of my knowledge and belief it is true, correct, and complete. I further multiple of the best of my knowledge and belief it is true, correct, and complete. I further multiple of the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete. I further many to the best of my knowledge and belief it is true, correct, and complete it is true, correct, and complete it is true, correct, and complete it is true, correct, and correct it is true, correct, and correct it is true, correct, and correct it is true, correct i			
	I am the individual that is the beneficial owner (or am authorized to sign am using this form to document myself for chapter 4 purposes, 本人為此表格相關的所有收入的實益擁有人(或獲授權代表實益擁有人	or the individual that is the beneficial owner) of all the income to which this form relates or (內國 ),或利用此表格申報本人第 4 章身分,			
•	The person named on line 1 of this form is not a U.S. person, 姓名列於此表格第 1 欄的人士並非美國人士,				
•	The income to which this form relates is: 此表格的相關收入為:				
	(a) not effectively connected with the conduct of a trade or business in 並非與於美國進行貿易或業務實際相關,	he United States,			
	(b) effectively connected but is not subject to tax under an applicable in 實際相關,但沒有適用所得稅協定下的應繳稅項,或	come tax treaty, or			
	(c) the partner's share of a partnership's effectively connected income, 合夥人在合夥企業的實際相關收入所佔份額				
	The person named on line 1 of this form is a resident of the treaty country. United States and that country, and 姓名列於此表格第 1 欄的人上、為表格第 9 欄列出的美國與該國(如有)	y listed on line 9 of the form (if any) within the meaning of the income tax treaty between the 簽署的所得稅協定涵義內的協定國居民,及			
•	For broker transactions or barter exchanges, the beneficial owner is an e經紀交易或易貨交易方面,實益擁有人為指引所定義的獲豁免外國人。	exempt foreign person as defined in the instructions.			
	withholding agent that can disburse or make payments of the income of any certification made on this form becomes incorrect.	nt that has control, receipt, or custody of the income of which I am the beneficial owner or an which I am the beneficial owner. I agree that I will submit a new form within 30 days if			
	明變得不正確,本人同意於30天內重新提交表格。	人的任何預扣代理,或有權向本實益擁有人分發或支付退稅之預扣代理。如此表格的任何認			
ign H 此簽	署 XX XX	Data MM DD WWW			
	Signature of beneficial owner (or individual authorized t 實蓋擁有人(或獲授權代表實益擁有人的	Date MM-DD-YYYY 日期 (月月-日日-年年年)			
	Print name of signer 簽署人正楷姓名	Capacity in which acting (if form is not signed by beneficial owner)			

For Paperwork Reduction Act Notice, see separate instructions.

有關《文書簡化規定通知》,請參閱另外列明的指引。

(本文件之中文譯本僅供參考,中英文本之內容如有歧異,概以英文本為準。)

Cat. No. 25047Z 類別. 編號. 25047Z

Form **W-8BEN** (Rev. 7-2017)

W-8BEN 表格 (於 2017年7月修訂)