依照IRS規定,表格內容以英文或中文填寫皆可

Form W-8BEN

(Rev. October 2021) 須為適用版本 Department of the Treasury Internal Revenue Service

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.
- ▶ Give this form to the withholding agent or paver. Do not send to the IRS.

OMB No. 1545-1621

		- Give this form to the withhol	ding agent of payer. Bo	not sena to the m		
Do NO	OT use this fo	orm if:			Instead, use Form	
• You	are NOT an i	ndividual			W-8BEN-	
• You	are a U.S. cit	tizen or other U.S. person, including a resident alie	en individual		W-	
	are a benefic er than perso	cial owner claiming that income is effectively conninal services)		trade or business	within the United States W-8EC	
• You	are a benefic	cial owner who is receiving compensation for pers	onal services performed in	the United States	8233 or W-	
• You	are a person	acting as an intermediary			W-8IM	
Note:	If you are re	sident in a FATCA partner jurisdiction (that is, a I	Model 1 IGA jurisdiction w	vith reciprocity), ce	ertain tax account information may b	
provid	ded to your ju	urisdiction of residence.	•		•	
Par		ntification of Beneficial Owner (see instructions)				
1		dividual who is the beneficial owner		2 Country of ci		
	姓名(必			國籍(必填)		
3	Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address. 永久居住地址(必填,且不得留郵政信箱或轉信地址)					
					Country	
	所在城市	n, state or province. Include postal code where ap 市及郵遞區號(必填)	эргорпате.		Country 所在國家(必填)	
4		dress (if different from above) 业(倘與第3欄永久居住地址不同才	需填寫,非必填)			
	City or tow	n, state or province. Include postal code where ap	ppropriate.		Country	
5	U.S. taxpay	payer identification number (SSN or ITIN), if required (see instructions)				
6a		t identifying number (see instructions) <mark>哉別碼(必填)</mark> 範例 : 客戶為台灣人,則應填寫臺灣稅務語	6b Check if FTIN not 識別碼		■ ■國家未派發稅務識別碼時勾選本欄	
7	Reference i	ference number(s) (see instructions) 8 Date of birth (MM-DD-YYYY) (see instructions) 出生日期(必填)				
Par	t II Clai	im of Tax Treaty Benefits (for chapter 3				
9	I certify tha	t the beneficial owner is a resident of			within the meaning of the income tax	
	-	veen the United States and that country.				
10	Special rat	ates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph				
	-	of the treaty identified on line	of the treaty identified on line 9 above to claim a % rate of withholding on (specify type of income):			
	Explain the	additional conditions in the Article and paragraph	n the beneficial owner mee	ets to be eligible for	r the rate of withholding:	
Part	III Cer	tification				
Under p	enalties of perjury,	, I declare that I have examined the information on this form and to the	he best of my knowledge and belief	it is true, correct, and con	nplete. I further certify under penalties of perjury tha	
		that is the beneficial owner (or am authorized to sign for t this form to document myself for chapter 4 purposes;	the individual that is the benefi	cial owner) of all the i	income or proceeds to which this form	
• The	person named	on line 1 of this form is not a U.S. person;				
• This	form relates to	:				
(a) income not effectively connected with the conduct of a trade or business in the United States;						
(b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an applicable income tax treaty;						
` '		are of a partnership's effectively connected taxable incon		Li		
. ,	•	count realized from the transfer of a partnership interest s	,	17	aty between the United States and that country, an	
		line 1 of this form is a resident of the treaty country listed on line 9 ions or barter exchanges, the beneficial owner is an exer		-	aty between the Onited States and that country; an	
		this form to be provided to any withholding agent that has cont			anoficial owner or any withholding agent that corn	
		ents of the income of which I am the beneficial owner. I agree the				
Sign Here						
	,	簽署人(或被簽署人授權之個人)	<u> </u>		簽署日期(必填)	
		Signature of beneficial owner (or individual au	· ·	•	Date (MM-DD-YYYY)	
					(倘表格非由簽署人本人簽署)	
		Print name of signer				