

W-8BEN – 美国预扣税及申报受益人之外籍身分证明 (个人)

如为联名户口，每位户口持有人必须分别填写一份表格。
W-8BEN表格必须准确填写，不得涂改。
如果填写有误，请用新表格重新填写。
请勿使用涂改液或其他涂改工具。

所有W表格均必须以英文填写。

Form W-8BEN Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)		OMB No. 1545-1621
(Rev. October 2021) Department of the Treasury Internal Revenue Service		
Do NOT use this form if: • You are NOT an individual • You are a U.S. citizen or other U.S. person, including a resident alien individual • You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the United States (other than personal services) • You are a beneficial owner who is receiving compensation for personal services performed in the United States • You are a person acting as an intermediary		
Instead, use Form: W-8BEN-E W-9 W-SECI 8233 or W-4 W-8IMY		
Part I Identification of Beneficial Owner (see instructions)		
1 Name of individual who is the beneficial owner	2 Country of citizenship	
3 Permanent residence 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 appropriate.		Country
4 Mailing address (if different from above)		
City or town, state or province. Include postal code where appropriate.		Country
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)		
6a Foreign tax identifying number (see instructions)	6b Check if FTIN not legally required <input type="checkbox"/>	
7 Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY) (see instructions)	
Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)		
9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.		
10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ 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 the beneficial owner meets to be eligible for the rate of withholding: _____		
Part III Certification		
Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:		
• I am the individual that is the beneficial owner for an authorized to sign for the individual that is the beneficial owner of all the income or proceeds to which this form relates or am using this form to document myself for chapter 4 purposes; • 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; (c) the partner's share of a partnership's effectively connected taxable income; or (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(i); • The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and • For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.		
Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner, or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.		
Sign Here <input type="checkbox"/> I certify that I have the capacity to sign for the person identified on line 1 of this form.		
Signature of beneficial owner (or individual authorized to sign for beneficial owner)		Date (MM-DD-YYYY)
Print name of signer		
For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 25047Z Form W-8BEN (Rev. 10-2021)		

由香港上海汇丰银行有限公司翻译 Translated by The Hongkong and Shanghai Banking Corporation Limited



A. 请详阅本节和相关指引，以确保使用正确的W表格。

B. 第一部分 (實益擁有人身分)

第1栏 全名 (姓名)

第2栏 国籍

第3栏 在第一行填写完整的街道地址，在第二行填写城市或城镇、州或省，包括邮政编码。

请勿使用：

邮政信箱或代收地址

第三方姓名

金融机构的地址

美国地址

第4栏 如果您的邮寄地址与永久居住地址不同，请填写邮寄地址。

注意： 如果填写美国邮寄地址，必须书面说明使用美国邮寄地址的原因。如果填写的国家与永久居住地所在国家不同，也必须书面说明原因。

第5栏 填写您的美国纳税人识别号(TIN)。该号码为您的社会保障号码(SSN)或个人纳税人识别号(ITIN)。有效的纳税人识别号应由9个数字组成。

纳税人识别号不会：

- (1) 含有数字以外的内容。
- (2) 少于或超过9个数字。
- (3) 含有9个相同的数字，或
- (4) 含有9个顺序排列的数字 (无论升序还是降序) 。

第6a栏 填写您的外国税务识别号码。如果没有外国税务识别号码，请转至

第8栏 并填写您的出生日期 (月 / 日日 / 年年年年)

第6b栏 毋须填写

第7栏 请勿填写户口号码，否则表格将仅限于所列户口使用。您可能须为其他户口另外填写表格。

注意： 有关谁是實益擁有人的进一步说明，请参阅W-8BEN指引。

C. 第二部分 (申请税务协定利益)

第9栏和第10栏 仅当您是协定国居民并有权申请税务协定利益，即您收到源自美国的固定或可确定年度或定期(FDAP)收入 (如股息) 时，才需填写本节内容。如果您对是否有资格申请税务协定利益存有疑问，我们建议您寻求独立税务意见。

D. 第三部分 (证明)

1. 请在表格上签名，并在签名下方的横线上以正楷工整书写姓名。
2. 请以月 / 日日 / 年年年年的格式填写日期。
3. 如果您代表**第1栏**所述的人士签名，请填写行事代表人一栏。

注意： 除非授权书特别注明代理人 / 律师可以签署税务文件或税务表格 (并提供或持有相关副本)，或者提供国税局2848表格，否则本表格不得通过授权书授权签署。

*汇丰不能提供任何税务建议。如需有关建议，请咨询独立税务顾问。