

W-8BEN-E-美国预提税及申报实益拥有人身分证明（实体）

W-8BEN-E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。
请勿使用涂改液或任何其他涂改工具。

所有 W 表格均必须以英文填写。

Form W-8BEN-E		Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)		OMB No. 1545-1621
<small>(Rev. April 2016) Department of the Treasury Internal Revenue Service</small>				
<small>* For use by entities. Individuals must use Form W-8BEN. * Section references are to the Internal Revenue Code. * Information about Form W-8BEN-E, and its separate instructions is at www.irs.gov/formw8bene. * Give this form to the withholding agent or payer. Do not send to the IRS.</small>				
Do NOT use this form for:				
- U.S. entity or U.S. citizen or resident				
- A foreign individual				
- A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the U.S. (unless claiming treaty benefits)				
- A foreign partnership, a foreign simple trust, or a foreign grantor trust (unless claiming treaty benefits) (see instructions for exceptions)				
- A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming that income is effectively connected U.S. income or that is claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b) (unless claiming treaty benefits) (see instructions for other exceptions)				
- Any person acting as an intermediary				
Instead use Form:				
- W-9				
- W-8BEN (Individual) or Form 8233				
- W-8ECI				
- W-8IMY				
- W-8EXR				
- W-8SIMY				
Part I Identification of Beneficial Owner				
1 Name of organization that is the beneficial owner		2 Country of incorporation or organization		
3 Name of disregarded entity receiving the payment (if applicable, see instructions)				
4 Chapter 3 Status (entity type) (Must check one box only):				
<input type="checkbox"/> Simple trust <input type="checkbox"/> Grantor trust <input type="checkbox"/> Corporation <input type="checkbox"/> Disregarded entity <input type="checkbox"/> Partnership				
<input type="checkbox"/> Central Bank of Issue <input type="checkbox"/> Tax-exempt organization <input type="checkbox"/> Complex trust <input type="checkbox"/> Estate <input type="checkbox"/> Government				
<input type="checkbox"/> Private foundation <input type="checkbox"/> International organization				
If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "Yes" complete Part III. <input type="checkbox"/> Yes <input type="checkbox"/> No				
5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status).				
<input type="checkbox"/> Nonparticipating FFI (including a limited FFI or an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner).				
<input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII.				
<input type="checkbox"/> Participating FFI.				
<input type="checkbox"/> Reporting Model 1 FFI.				
<input type="checkbox"/> Reporting Model 2 FFI.				
<input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XIII). See instructions.				
<input type="checkbox"/> Sponsored FFI. Complete Part IV.				
<input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V.				
<input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part VI.				
<input type="checkbox"/> Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII.				
<input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. Complete Part VIII.				
<input type="checkbox"/> Certified deemed-compliant investment advisors and investment managers. Complete Part IX.				
<input type="checkbox"/> Owner-documented FFI. Complete Part X.				
<input type="checkbox"/> Restricted distributor. Complete Part XI.				
<input type="checkbox"/> International organization. Complete Part XIV.				
<input type="checkbox"/> Exempt retirement plans. Complete Part XV.				
<input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI.				
<input type="checkbox"/> Territory financial institution. Complete Part XVII.				
<input type="checkbox"/> Nonfinancial group entity. Complete Part XVIII.				
<input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX.				
<input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX.				
<input type="checkbox"/> 501(c) organization. Complete Part XXI.				
<input type="checkbox"/> Nonprofit organization. Complete Part XXII.				
<input type="checkbox"/> Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII.				
<input type="checkbox"/> Excepted territory NFFE. Complete Part XXIV.				
<input type="checkbox"/> Active NFFE. Complete Part XXV.				
<input type="checkbox"/> Passive NFFE. Complete Part XXVI.				
<input type="checkbox"/> Excepted inter-affiliate FFI. Complete Part XXVII.				
<input type="checkbox"/> Direct reporting NFFE.				
<input type="checkbox"/> Sponsored direct reporting NFFE. Complete Part XXVIII.				
<input type="checkbox"/> Account that is not a financial account.				
6 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address (other than a registered address).				
City or town, state or province. Include postal code where appropriate.			Country	
7 Mailing address (if different from above)				
City or town, state or province. Include postal code where appropriate.			Country	
8 U.S. taxpayer identification number (TIN), if required		9a GIIN		9b Foreign TIN
10 Reference number(s) (see instructions)				
Note: Please complete remainder of the form including signing the form in Part XXX.				
For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 59689N Form W-8BEN-E (Rev. 4-2016)				

A. 请详阅本节和相关指引，确保使用正确的W表格。

B. 第一部分（实益拥有人身分）（表格第1页）

第1栏 实益拥有人实体全名

第2栏 公司或机构成立或组建的国家

第3栏 获得款项的无行企业实体名称（如适用）

第4栏 第3章身分（实体种类）（必须只勾选一个方格）

第5栏 第4章身分（FATCA身分）（实体种类）（必须只勾选一个方格）

第6栏 永久居住地址

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，并于国家方格填写「国家」。

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7栏 邮寄地址必须填写「国家」於国家方格内。

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8栏 美国纳税人识别号(TIN)（如需要）

填写雇主身分识别号(EIN)（如有）。

有效的雇主身分识别号应由9位数字组成。

雇主身分识别号不会：

(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9a栏 填写您的全球中介机构识别号码(GIIN)。

第9b栏 填写您的外国纳税人识别号(Foreign TIN)（如有）。

如果没有全球中介机构识别号码，并且计划马上申请，或者您已经申请了全球中介机构识别号码，请在全球中介机构识别号码一栏填写“Applied For”（已申请）。您必须在60天内向我们提供您的全球中介机构识别号码。

第10栏 留空。

注意：有关谁是实益拥有人的进一步说明，请参阅W-8BEN-E指引。



W-8BEN-E-美国预提税及申报实益拥有人身分证明（实体）

Form W-8BEN-E (Rev. 4-2016) Page 2

Part II Disregarded Entity or Branch Receiving Payment. (Complete only if a disregarded entity with a GIIN or a branch of an FFI in a country other than the FFI's country of residence. See instructions.)

11 Chapter 4 Status (FATCA status) of disregarded entity or branch receiving payment
 Limited Branch (see instructions). Reporting Model 1 FFI. U.S. Branch.
 Participating FFI. Reporting Model 2 FFI.

12 Address of disregarded entity or branch (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address (other than a registered address). **C**

City or town, state or province. Include postal code where appropriate.

Country

13 GIIN (if any)

C. 第二部分（表格第2页）

获得款项的无行企业实体或分公司（仅当已取得全球中介机构识别号码的外国金融机构之无行企业实体或分公司不属外国金融机构所在的国家，才需填写本节内容。）

Part III Claim of Tax Treaty Benefits (if applicable). (For chapter 3 purposes only.)

14 I certify that (check all that apply): **D**

a The beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

b The beneficial owner derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits. The following are types of limitation on benefits provisions that may be included in an applicable tax treaty (check only one; see instructions):

<input type="checkbox"/> Government	<input type="checkbox"/> Company that meets the ownership and base erosion test
<input type="checkbox"/> Tax exempt pension trust or pension fund	<input type="checkbox"/> Company that meets the derivative benefits test
<input type="checkbox"/> Other tax exempt organization	<input type="checkbox"/> Company with an item of income that meets active trade or business test
<input type="checkbox"/> Publicly traded corporation	<input type="checkbox"/> Favorable discretionary determination by the U.S. competent authority received
<input type="checkbox"/> Subsidiary of a publicly traded corporation	<input type="checkbox"/> Other (specify Article and paragraph): _____

c The beneficial owner is claiming treaty benefits for U.S. source dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation and meets qualified resident status (see instructions).

15 **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 14a above to claim a _____% rate of withholding on (specify type of income): _____
Explain the additional conditions in the Article the beneficial owner meets to be eligible for the rate of withholding: _____

D. 第三部分（申请税务协定利益）（如适用）（只供第3章使用）

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。

第14a栏 勾选方格，并填写居住「国家」。

第14b栏或第14c栏 勾选其中一个方格（如适用）。

利益限制条款(LoB) 勾选实体申请协定利益所依据的条款。

第15栏 特别税率及条件（如适用，请参阅指引）

注意：如果您对是否合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。

W-8BEN-E-美国预提税及申报实益拥有人身分证明（实体）

5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status).

<input type="checkbox"/> Nonparticipating FFI (including a limited FFI or an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner).	<input type="checkbox"/> Nonreporting IGA FFI. Complete Part XII.
<input type="checkbox"/> Participating FFI.	<input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII.
<input type="checkbox"/> Reporting Model 1 FFI.	<input type="checkbox"/> International organization. Complete Part XIV.
<input type="checkbox"/> Reporting Model 2 FFI.	<input type="checkbox"/> Exempt retirement plans. Complete Part XV.
<input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). See instructions.	<input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI.
<input type="checkbox"/> Sponsored FFI. Complete Part IV.	<input type="checkbox"/> Territory financial institution. Complete Part XVII.
<input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V.	<input type="checkbox"/> Nonfinancial group entity. Complete Part XVIII.
<input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part VI.	<input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX.
<input type="checkbox"/> Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII.	<input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX.
<input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. Complete Part VIII.	<input type="checkbox"/> 501(c) organization. Complete Part XXI.
<input type="checkbox"/> Certified deemed-compliant investment advisors and investment managers. Complete Part IX.	<input type="checkbox"/> Nonprofit organization. Complete Part XXII.
<input type="checkbox"/> Owner-documented FFI. Complete Part X.	<input type="checkbox"/> Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII.
<input type="checkbox"/> Restricted distributor. Complete Part XI.	<input type="checkbox"/> Excepted territory NFFE. Complete Part XXIV.
	<input type="checkbox"/> Active NFFE. Complete Part XXV.
	<input type="checkbox"/> Passive NFFE. Complete Part XXVI.
	<input type="checkbox"/> Excepted inter-affiliate FFI. Complete Part XXVII.
	<input type="checkbox"/> Direct reporting NFFE.
	<input type="checkbox"/> Sponsored direct reporting NFFE. Complete Part XXVIII.
	<input type="checkbox"/> Account that is not a financial account.

例子

E. 第四部分至第二十八部分

表格的余下部分（第四部分至第二十八部分）包括您在第一部分第5栏勾选的第4章身分相关的具体证明。

就表格本部分而言，您只需填写所适用的第4章身分证明。

例子：

若实体选择第一部分第5栏为「经认证视为合规的非注册本地银行」，实体必须填写W-8BEN-E表格内的第五部分。

Form W-8BEN-E (Rev. 4-2016) Page 3

Part V Certified Deemed-Compliant Nonregistering Local Bank

18 I certify that the FFI identified in Part I:

- Operates and is licensed solely as a bank or credit union (or similar cooperative credit organization operated without profit) in its country of incorporation or organization;
- Engages primarily in the business of receiving deposits from and making loans to, with respect to a bank, retail customers unrelated to such bank and, with respect to a credit union or similar cooperative credit organization, members, provided that no member has a greater than five percent interest in such credit union or cooperative credit organization;
- Does not solicit account holders outside its country of organization;
- Has no fixed place of business outside such country (for this purpose, a fixed place of business does not include a location that is not advertised to the public and from which the FFI performs solely administrative support functions);
- Has no more than \$175 million in assets on its balance sheet and, if it is a member of an expanded affiliated group, the group has no more than \$500 million in total assets on its consolidated or combined balance sheets; **and**
- Does not have any member of its expanded affiliated group that is a foreign financial institution, other than a foreign financial institution that is incorporated or organized in the same country as the FFI identified in Part I and that meets the requirements set forth in this Part V.

您将注意到，需要填写的章节标题与第一部分第5栏所选择的第4章身分（FATCA身分）相同，而第一部分第5栏亦载有需填写章节的说明，即本例子中的第五部分。

W-8BEN-E-美国预提税及申报实益拥有人身分证明（实体）

Part XXIX Substantial U.S. Owners of Passive NFFE		
As required by Part XXVI, provide the name, address, and TIN of each substantial U.S. owner of the NFFE. Please see instructions for definition of substantial U.S. owner. If providing the form to an FFI treated as a reporting Model 1 FFI or reporting Model 2 FFI, an NFFE may also use this Part for reporting its controlling U.S. persons under an applicable IGA.		
Name	Address	TIN
	F	

F. 第二十九部分 被动非金融外国实体的实质美国拥有人（如第二十六部分已填写或于适用时，才需填写此部分。）

请提供每名被动非金融外国实体的实质美国拥有人的姓名、地址及纳税人识别号。

请参阅W-8BEN-E表格内的指引，以查看实质美国拥有人的定义。

Part XXX 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:		
<ul style="list-style-type: none"> The entity identified on line 1 of this form is the beneficial owner of all the income to which this form relates, is using this form to certify its status for chapter 4 purposes, or is a merchant submitting this form for purposes of section 6050W. The entity identified on line 1 of this form is not a U.S. person. The income to which this form relates is: (a) not effectively connected with the conduct of a trade or business in the United States, (b) effectively connected but not subject to tax under an income tax treaty, or (c) the partner's share of a partnership's effectively connected income, 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 the entity on line 1 is the beneficial owner or any withholding agent that can disburse or make payments of the income of which the entity on line 1 is the beneficial owner.		
I agree that I will submit a new form within 30 days if any certification on this form becomes incorrect.		
Sign Here	1	2
	Signature of individual authorized to sign for beneficial owner	Print Name
		3
		Date (MM-DD-YYYY)
4 <input type="checkbox"/> I certify that I have the capacity to sign for the entity identified on line 1 of this form.		
Form W-8BEN-E (Rev. 4-2016)		

G. 第三十部分（证明）（表格第8页）

您必须得到授权才可代表此表格第1栏指明的实体签署。

1. 请签署表格。
2. 请在签署旁以正楷填写您的姓名。
3. 请以「月月 / 日日 / 年年年年」的格式填写日期。
4. 请於这里勾选「本人证明本人有权代表此表格第 1 栏指明的实体签署」。

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。

W-8BEN-E- Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)

A Form W-8BEN-E must be completed correctly without any alterations.

If you make a mistake, please start over using a new form.

Do not use liquid paper or any other correctional tool.

All W Forms must be completed in English.

Form W-8BEN-E Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities) <small>(Rev. April 2016)</small> Department of the Treasury Internal Revenue Service		OMB No. 1545-1021 * For use by entities. Individuals must use Form W-8BEN. * Section references are to the Internal Revenue Code. * Information about Form W-8BEN-E and its separate instructions is at www.irs.gov/formw8ben-e . * Give this form to the withholding agent or payer. Do not send to the IRS.	
Do NOT use this form for: • U.S. entity or U.S. citizen or resident • A foreign individual • A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the U.S. (unless claiming treaty benefits). • A foreign partnership, a foreign simple trust, or a foreign grantor trust (unless claiming treaty benefits) (see instructions for exceptions) • A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession claiming that income is effectively connected U.S. income or that is claiming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b) (unless claiming treaty benefits) (see instructions for other exceptions) • Any person acting as an intermediary		Instead use Form: • W-9 • W-8BEN (Individual) or Form 8233 • W-8ECI • W-8IMY • W-8ECI or W-8EXP • W-8SIMY	
Part I Identification of Beneficial Owner			
1 Name of organization that is the beneficial owner		2 Country of incorporation or organization	
3 Name of disregarded entity receiving the payment (if applicable, see instructions)			
4 Chapter 3 Status (entity type) (Must check one box only): <input type="checkbox"/> Corporation <input type="checkbox"/> Disregarded entity <input type="checkbox"/> Partnership <input type="checkbox"/> Simple trust <input type="checkbox"/> Grantor trust <input type="checkbox"/> Complex trust <input type="checkbox"/> Estate <input type="checkbox"/> Government <input type="checkbox"/> Central Bank of Issue <input type="checkbox"/> Tax-exempt organization <input type="checkbox"/> Private foundation <input type="checkbox"/> International organization If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "yes" complete Part III. <input type="checkbox"/> Yes <input type="checkbox"/> No			
5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status). <input type="checkbox"/> Nonparticipating FFI (including a limited FFI or an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner). <input type="checkbox"/> Participating FFI. <input type="checkbox"/> Reporting Model 1 FFI. <input type="checkbox"/> Reporting Model 2 FFI. <input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). See instructions. <input type="checkbox"/> Sponsored FFI. Complete Part IV. <input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V. <input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part VI. <input type="checkbox"/> Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII. <input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. Complete Part VIII. <input type="checkbox"/> Certified deemed-compliant investment advisors and investment managers. Complete Part IX. <input type="checkbox"/> Owner-documented FFI. Complete Part X. <input type="checkbox"/> Restricted distributor. Complete Part XI. <input type="checkbox"/> Nonreporting IGA FFI. Complete Part XII. <input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII. <input type="checkbox"/> International organization. Complete Part XIV. <input type="checkbox"/> Exempt retirement plans. Complete Part XV. <input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI. <input type="checkbox"/> Territorial financial institution. Complete Part XVII. <input type="checkbox"/> Nonfinancial group entity. Complete Part XVIII. <input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX. <input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX. <input type="checkbox"/> 501(c) organization. Complete Part XXI. <input type="checkbox"/> Nonprofit organization. Complete Part XXII. <input type="checkbox"/> Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII. <input type="checkbox"/> Excepted territory NFFE. Complete Part XXIV. <input type="checkbox"/> Active NFFE. Complete Part XXV. <input type="checkbox"/> Passive NFFE. Complete Part XXVI. <input type="checkbox"/> Excepted inter-affiliate FFI. Complete Part XXVII. <input type="checkbox"/> Direct reporting NFFE. <input type="checkbox"/> Sponsored direct reporting NFFE. Complete Part XXVIII. <input type="checkbox"/> Account that is not a financial account.			
6 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address (other than a registered address). City or town, state or province. Include postal code where appropriate. Country			
7 Mailing address (if different from above) City or town, state or province. Include postal code where appropriate. Country			
8 U.S. taxpayer identification number (TIN), if required		9a GIIN	
		b Foreign TIN	
10 Reference number(s) (see instructions)			
Note: Please complete remainder of the form including signing the form in Part XXX. For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 59689N Form W-8BEN-E (Rev. 4-2016)			

A. Please read this section and the associated instructions to ensure you are completing the correct W form.

B. PART I (Identification of Beneficial Owner) (Page 1 of form)

Line 1 Full name of organization that is the beneficial owner

Line 2 Country of incorporation or organization

Line 3 Name of disregarded entity receiving the payment (if applicable)

Line 4 Chapter 3 Status (entity type) (Must check one box only)

Line 5 Chapter 4 Status (FATCA status) (entity type) (Must check one box only)

Line 6 Permanent residence address

Insert full street address on the first line, and the City or town, state or province including post code on the 2nd line, and **"Country" in the country box.**

DO NOT USE:

PO Box or C/O address

Name of a third party

Address at a Financial Institution

US address

Line 7 Mailing address including "Country" in the country box

Insert mailing address only if different from the Permanent residence address.

Note: If a US mailing address is entered, a written explanation/reason for the US mailing address will be required. If the country differs to the country in the permanent residence address then a written explanation will be required.

Line 8 U.S. taxpayer identification number (TIN), if required

Insert Employer Identification Number (EIN) if held.

A valid EIN will always be made up of 9 digits.

An EIN should not:

(1) contain something other than numbers,

(2) contain fewer than or more than nine digits,

(3) consist of nine of the same number, or

(4) consist of nine sequential numbers (whether ascending or descending order).

Line 9a Insert your Global Intermediary Identification Number (GIIN).

9b Insert your Foreign Tax Identification Number (Foreign TIN) if held.

If you do not have a GIIN and you intend to apply for one soon or you have already applied for a GIIN, please enter 'Applied For' in the space for the GIIN. You will have 60 days to provide your GIIN to us.

Line 10 Leave blank.

Note: Please refer to the W-8BEN-E instructions for further guidance on who is the beneficial owner.

W-8BEN-E- Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)

Form W-8BEN-E (Rev. 4-2016) Page 2

Part II Disregarded Entity or Branch Receiving Payment. (Complete only if a disregarded entity with a GIIN or a branch of an FFI in a country other than the FFI's country of residence. See instructions.)

11 Chapter 4 Status (FATCA status) of disregarded entity or branch receiving payment
 Limited Branch (see instructions). Reporting Model 1 FFI. U.S. Branch.
 Participating FFI. Reporting Model 2 FFI.

12 Address of disregarded entity or branch (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address (other than a registered address). **C**

City or town, state or province. Include postal code where appropriate.

Country

13 GIIN (if any)

C. PART II (Page 2 of Form)

Disregarded Entity or Branch Receiving Payment (Complete only if disregarded entity with a GIIN or a branch of an FFI in a country other than the FFI's country of residence.)

Part III Claim of Tax Treaty Benefits (if applicable). (For chapter 3 purposes only.)

14 I certify that (check all that apply): **D**

a The beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

b The beneficial owner derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits. The following are types of limitation on benefits provisions that may be included in an applicable tax treaty (check only one; see instructions):

<input type="checkbox"/> Government	<input type="checkbox"/> Company that meets the ownership and base erosion test
<input type="checkbox"/> Tax exempt pension trust or pension fund	<input type="checkbox"/> Company that meets the derivative benefits test
<input type="checkbox"/> Other tax exempt organization	<input type="checkbox"/> Company with an item of income that meets active trade or business test
<input type="checkbox"/> Publicly traded corporation	<input type="checkbox"/> Favorable discretionary determination by the U.S. competent authority received
<input type="checkbox"/> Subsidiary of a publicly traded corporation	<input type="checkbox"/> Other (specify Article and paragraph): _____

c The beneficial owner is claiming treaty benefits for U.S. source dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation and meets qualified resident status (see instructions).

15 **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 14a above to claim a _____ % rate of withholding on (specify type of income): _____
 Explain the additional conditions in the Article the beneficial owner meets to be eligible for the rate of withholding: _____

D. PART III (Claim of Tax Treaty Benefits) (if applicable) (For chapter 3 purposes only)

Only complete this section if you are a resident in a treaty country and entitled to claim tax treaty benefits, i.e. if you are receiving fixed or determinable, annual or periodical (FDAP) income, for example dividend payments, and the payment is from sources within the US.

Line 14a Tick the box and insert "Country" of residency.

Line 14b OR 14c Tick either box as applicable.

Limitation on Benefit provisions (LoB) Check the box the entity is claiming treaty benefits under.

Line 15 Special rates and conditions (only if applicable—see instructions)

Note: If you have any queries regarding your eligibility to claim tax treaty benefits, we suggest that you seek independent tax advice.

W-8BEN-E- Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)

5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status).

<input type="checkbox"/> Nonparticipating FFI (including a limited FFI or an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner).	<input type="checkbox"/> Nonreporting IGA FFI. Complete Part XII.
<input type="checkbox"/> Participating FFI.	<input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII.
<input type="checkbox"/> Reporting Model 1 FFI.	<input type="checkbox"/> International organization. Complete Part XIV.
<input type="checkbox"/> Reporting Model 2 FFI.	<input type="checkbox"/> Exempt retirement plans. Complete Part XV.
<input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). See instructions.	<input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI.
<input type="checkbox"/> Sponsored FFI. Complete Part IV.	<input type="checkbox"/> Territory financial institution. Complete Part XVII.
<input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V.	<input type="checkbox"/> Nonfinancial group entity. Complete Part XVIII.
<input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part VI.	<input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX.
<input type="checkbox"/> Certified deemed-compliant sponsored, closely-held investment vehicle. Complete Part VII.	<input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX.
<input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. Complete Part VIII.	<input type="checkbox"/> 501(c) organization. Complete Part XXI.
<input type="checkbox"/> Certified deemed-compliant investment advisors and investment managers. Complete Part IX.	<input type="checkbox"/> Nonprofit organization. Complete Part XXII.
<input type="checkbox"/> Owner-documented FFI. Complete Part X.	<input type="checkbox"/> Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII.
<input type="checkbox"/> Restricted distributor. Complete Part XI.	<input type="checkbox"/> Excepted territory NFFE. Complete Part XXIV.
	<input type="checkbox"/> Active NFFE. Complete Part XXV.
	<input type="checkbox"/> Passive NFFE. Complete Part XXVI.
	<input type="checkbox"/> Excepted inter-affiliate FFI. Complete Part XXVII.
	<input type="checkbox"/> Direct reporting NFFE.
	<input type="checkbox"/> Sponsored direct reporting NFFE. Complete Part XXVIII.
	<input type="checkbox"/> Account that is not a financial account.

E. PARTS IV to XXVIII

The remaining Parts of the form (Parts IV through XXVIII) include specific certifications relating to the chapter 4 status you ticked on Line 5 of Part I.

For this portion of the form, you are required to complete only the certification applicable to your chapter 4 status.

Example

Example:

If an entity selected 'Certified deemed-compliant nonregistering local bank' on Line 5 of Part I, the entity is required to complete Part V of the Form W-8BEN-E.

You will note that the heading of the section to be completed matches the chapter 4 status (FATCA status) selected on Line 5 of Part I, and Line 5 of Part I also contains the reference to the section to be completed i.e. in this example Part V.

Form W-8BEN-E (Rev. 4-2016) Page 3

Part V Certified Deemed-Compliant Nonregistering Local Bank

18 I certify that the FFI identified in Part I:

- Operates and is licensed solely as a bank or credit union (or similar cooperative credit organization operated without profit) in its country of incorporation or organization;
- Engages primarily in the business of receiving deposits from and making loans to, with respect to a bank, retail customers unrelated to such bank and, with respect to a credit union or similar cooperative credit organization, members, provided that no member has a greater than five percent interest in such credit union or cooperative credit organization;
- Does not solicit account holders outside its country of organization;
- Has no fixed place of business outside such country (for this purpose, a fixed place of business does not include a location that is not advertised to the public and from which the FFI performs solely administrative support functions);
- Has no more than \$175 million in assets on its balance sheet and, if it is a member of an expanded affiliated group, the group has no more than \$500 million in total assets on its consolidated or combined balance sheets; and
- Does not have any member of its expanded affiliated group that is a foreign financial institution, other than a foreign financial institution that is incorporated or organized in the same country as the FFI identified in Part I and that meets the requirements set forth in this Part V.

W-8BEN-E- Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)

Part XXIX Substantial U.S. Owners of Passive NFFE

As required by Part XXVI, provide the name, address, and TIN of each substantial U.S. owner of the NFFE. Please see instructions for definition of substantial U.S. owner. If providing the form to an FFI treated as a reporting Model 1 FFI or reporting Model 2 FFI, an NFFE may also use this Part for reporting its controlling U.S. persons under an applicable IGA.

Name	Address	TIN
	F	

F. Part XXIX Substantial U.S. Owners of Passive NFFE (Complete only if Part XXVI completed and only if applicable.)

Please provide the name, address, and TIN of each substantial U.S. owner of the NFFE.
Please see Form W-8BEN-E instructions for definition of substantial U.S. owner.

Part XXX 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:

- The entity identified on line 1 of this form is the beneficial owner of all the income to which this form relates, is using this form to certify its status for chapter 4 purposes, or is a merchant submitting this form for purposes of section 6050W.
- The entity identified on line 1 of this form is not a U.S. person.
- The income to which this form relates is: (a) not effectively connected with the conduct of a trade or business in the United States, (b) effectively connected but is not subject to tax under an income tax treaty, or (c) the partner's share of a partnership's effectively connected income, 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 the entity on line 1 is the beneficial owner or any withholding agent that can disburse or make payments of the income of which the entity on line 1 is the beneficial owner.

I agree that I will submit a new form within 30 days if any certification on this form becomes incorrect.

Sign Here **1** **2** **3**

Signature of individual authorized to sign for beneficial owner Print Name Date (MM-DD-YYYY)

4 I certify that I have the capacity to sign for the entity identified on line 1 of this form.

Form **W-8BEN-E** (Rev. 4-2016)

G. PART XXX (Certification) (Page 8 of form)

- You must be authorised to sign on behalf of the entity on Line 1.
1. Please sign the form.
 2. Please print your name on the line next to your signature.
 3. Please date the form using the MM/DD/YYYY format.
 4. Please tick here 'I certify that I have the capacity to sign for the entity identified on Line 1 of the form'.

Note: This form cannot be signed under a Power of Attorney (POA) unless the POA document specifically mentions that the agent/attorney is able to sign on tax matters or on tax forms (and a copy is provided, or held), or alternatively if an IRS Form 2848 is provided.

HSBC are unable to provide any Tax advice.
If you require any advice please refer to an independent tax advisor.