

# W-8BEN — 美国预提税及申报受益所有人之外国人身分证明 (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 <b>W-8BEN</b>		Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)		OMB No. 1545-1621	
(Rev. January 2017)		Department of the Treasury Internal Revenue Service		For use by individuals. Entities must use Form W-8BEN-E. Information about Form W-8BEN and its separate instructions is at <a href="http://www.irs.gov/formw8ben">www.irs.gov/formw8ben</a> . Give this form to the withholding agent or payer. Do not send to the IRS.	
<b>Do NOT use this form if:</b>				<b>Instead, use Form:</b>	
• You are NOT an individual				W-8BEN-E	
• You are a U.S. citizen or other U.S. person, including a resident alien individual				W-9	
• You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services)				W-BECl	
• You are a beneficial owner who is receiving compensation for personal services performed in the United States				8233 or W-4	
• You are a person acting as an intermediary				W-BIMY	
<b>Note:</b> If you are resident in a FATCA partner jurisdiction (i.e., a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.					
<b>Part I Identification of Beneficial Owner (see instructions)</b>					
1 Name of individual who is the beneficial owner		2 Country of citizenship			
Crive Calder		United Kingdom			
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.					
165 Westbrook Lane					
City or town, state or province. Include postal code where appropriate.		Country			
London NW2 54J		United Kingdom			
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)					
327474749					
6 Foreign tax identifying number (see instructions)					
7 Reference number(s) (see instructions)					
8 Date of birth (MM-DD-YYYY) (see instructions)					
<b>Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)</b>					
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:					
<b>Part III Certification</b>					
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 (or am authorized to sign for the individual that is the beneficial owner) of all the income 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.					
• 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 applicable income tax treaty, or					
(c) the partner's share of a partnership's effectively connected income.					
• 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		1		2	
Signature of beneficial owner (or individual authorized to sign for beneficial owner)		3		Date (MM-DD-YYYY)	
Print name of signer		Capacity in which acting (if form is not signed by beneficial owner)			
For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 25047Z Form <b>W-8BEN</b> (Rev. 1-2017)					

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 (受益所有人身分)

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6栏 填写您在美国以外的税务识别号码。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/年年年年)

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: 有关谁是受益所有人的进一步说明, 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/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, 请填写行事代表人栏。

注意 除非授权书特别註明代理人/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 – Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

For Joint Accounts, each account holder must complete a separate form. A form W-8BEN 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.

<b>Form W-8BEN</b> Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals) (Rev. January 2017) Department of the Treasury Internal Revenue Service		OMB No. 1545-1621 For use by individuals. Entities must use Form W-8BEN-E. Information about Form W-8BEN and its separate instructions is at <a href="http://www.irs.gov/formw8ben">www.irs.gov/formw8ben</a> . Give this form to the withholding agent or payer. Do not send to the IRS.
<b>Do NOT use this form if:</b> <ul style="list-style-type: none"> <li>You are NOT an individual</li> <li>You are a U.S. citizen or other U.S. person, including a resident alien individual</li> <li>You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services)</li> <li>You are a beneficial owner who is receiving compensation for personal services performed in the United States</li> <li>You are a person acting as an intermediary</li> </ul>		
<b>Instead, use Form:</b> <ul style="list-style-type: none"> <li>W-8BEN-E</li> <li>W-9</li> <li>W-BECl</li> <li>8233 or W-4</li> <li>W-BIMY</li> </ul>		
<b>Note:</b> If you are resident in a FATCA partner jurisdiction (i.e., a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.		
<b>Part I Identification of Beneficial Owner (see instructions)</b>		
1 Name of individual who is the beneficial owner	2 Country of citizenship	
Crive Calder	United Kingdom	
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.		
165 Westbrook Lane		
City or town, state or province. Include postal code where appropriate.		Country
London NW2 54J		United Kingdom
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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:		
<b>Part III Certification</b> 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 (or am authorized to sign for the individual that is the beneficial owner) of all the income 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.		
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 applicable income tax treaty, or		
(c) the partner's share of a partnership's effectively connected income.		
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	1	2
	Signature of beneficial owner (or individual authorized to sign for beneficial owner)	Date (MM-DD-YYYY)
	3	
	Print name of signer	Capacity in which acting (if form is not signed by beneficial owner)
For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 25047Z Form W-8BEN (Rev. 1-2017)		

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)

Line 1 Full Name (First Name and Last Name).

Line 2 Country of Citizenship

Line 3 Insert full street address on the first line, and the City or town, state or province including post code on the 2nd line.

DO NOT USE:

PO Box or C/O address

Name of a third party

Address at a Financial Institution

US address

Line 4 Insert a mailing address only if it is different from your 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 5 Insert your US Taxpayer Identification Number (TIN). It will either be a Social Security Number (SSN) or an Individual Taxpayer Identification Number (ITIN). A valid TIN will always be made up of 9 digits.

A TIN 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 6 Insert your non-US tax identifying number. If you do not have one, go to

Line 8 and write down your date of birth (MM/DD/YYYY).

Line 7 DO NOT LIST ACCOUNT NUMBERS as this could limit the form to the accounts listed and you may have to provide another form for your other accounts.

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

## C. PART II (Claim of Tax Treaty Benefits)

Line 9 and 10 Only complete this section if you are resident in a treaty country and entitled to claim tax treaty benefits, ie 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. If you have any queries regarding your eligibility to claim tax treaty benefits, we suggest that you seek independent tax advice.

## D. PART III (Certification)

1. Please sign the form and print your name on the line below your signature.

2. Please date the form using the MM/DD/YYYY format.

3. If you are signing on behalf of the person stated on Line 1, please complete the capacity field.

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) 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.

