W-8BEN – Certificate of Foreign Status of Beneficial Owner for US Tax Withholding and Reporting (Individual)

This purpose of this document is to provide some examples of how the W-8BEN form is filled.

General Notes for the Submission of a new W-8BEN form

- 1. All information in the form must be completed in English
- 2. For Joint Accounts, each account holder must complete a separate form.
- 3. A form W-8BEN must be completed correctly without any alternations.

Sample 1 - Address of Residence is in China

| Form W-8 | BEN | Certificate of Foreign State States Tax Withholdin | | | | |
|--|----------------------------------|---|--|---|--|---|
| (Rev. October 2) Department of the | Treasury | OMB No. 1545-1621 | | | | |
| Internal Revenue S | | ➤ Give this form to the withholding | ng agent or payer. Do r | ot send to the | IRS. | |
| You are NOT | | | | | | Instead, use Form: |
| | | | | | | W-0BEN-E |
| | | or other U.S. person, including a resident alien | | | | |
| (other than p | ersonal se | • | | | | W-8ECI |
| | | ner who is receiving compensation for person | al services performed in | the United State | 88 | 8233 or W-4 |
| | | g as an intermediary | | | | W-8IMY |
| | | t in a FATCA partner jurisdiction (that is, a Mo ction of residence. | del 1 IGA jurisdiction w | ith reciprocity), | certain tax acco | unt information may be |
| | | ation of Beneficial Owner (see instr | uctions) | | | |
| | of individu | al who is the beneficial owner | | 2 Country of | citizenship | |
| CHEN Dawen 3 Permai | nont rocid | ence address (street, apt. or suite no., or rural | route). Do not use a P.C | China box or in-car | o of address | |
| | | | | . DOX OF III-Car | e-or address. | |
| Beijing City, East District, Mingdu Road, Hengda Garden, 7th Building, Room 702 City or town, state or province. Include postal code where appropriate. | | | | | | |
| Beijing 10001 | | | · | | China | |
| | address | (if different from above) | | | | В |
| | | | | | | |
| City or | town, sta | te or province. Include postal code where appr | opriate. | | Country | |
| 5 U.S. ta | | entification number (SSN or ITIN), if required (s | itti\ | | | |
| 3 0.5. ta | xpayer iu | entinication number (SSN or THN), il required (s | ee instructions) | | | |
| 6a Foreig | n tax ident | ifying number (see instructions) | 6b Check if FTIN not | legally required | | 🗸 |
| 7 Refere | nce numb | er(s) (see instructions) | 8 Date of birth (MM | -DD-YYYY) (see | instructions) | |
| | 0 | 20903200, 020903201 | | | | |
| | | f Tax Treaty Benefits (for chapter 3 p | ourposes only) (see | instructions) | _ | |
| | | beneficial owner is a resident of China | | | within the me | aning of the income tax |
| | | he United States and that country. nd conditions (if applicable—see instructions): | The beneficial owner is | claiming the pro | wisions of Article | and paragraph |
| io opean | an rates an | of the treaty identified on line 9 | | | | y type of income): |
| | | | | | | |
| Explair | n the addi | tional conditions in the Article and paragraph the | ne beneficial owner mee | ts to be eligible | for the rate of wi | thholding: |
| | | | | | | |
| | Certifica | | | | | |
| | | re that I have examined the information on this form and to the t the beneficial owner (or am authorized to sign for the | | | | |
| | | rm to document myself for chapter 4 purposes; | individual that is the benefit | alai owner) or all tr | e income or proce | eds to which this form |
| The person na | med on line | 1 of this form is not a U.S. person; | | | | |
| This form relat | | | | | | |
| | | connected with the conduct of a trade or business in | | | | touteste |
| | | nected with the conduct of a trade or business in the a partnership's effectively connected taxable income; | | oject to tax under a | an applicable incol | ne tax treaty, |
| | | ealized from the transfer of a partnership interest subj | | ction 1446m: | | |
| | | this form is a resident of the treaty country listed on line 9 of t | - | | reaty between the Uni | ted States and that country; and |
| For broker trans | nsactions o | barter exchanges, the beneficial owner is an exempt | foreign person as defined i | n the instructions. | | |
| Furthermore, I auth disburse or make p | nortze this for payments of t | m to be provided to any withholding agent that has control, the income of which I am the beneficial owner. I agree that | receipt, or custody of the inco I will submit a new form with | ne of which I am the in 30 days if any cei | beneficial owner or a rtification made on t | any withholding agent that can his form becomes incorrect. |
| | V | certify that I have the capacity to sign for the person | identified on line 1 of this fo | orm. | | |
| Sign Here | _ | | | | | |
| | Miles and | | | | 10 | 0-31-2021 |
| | | Signature of beneficial owner (or individual author | orized to sign for beneficial of | owner) | Date (| MM-DD-YYYY) |
| | | N Dawen name of signer | | | | |
| For Paperwor | | ion Act Notice, see separate instructions. | Cat. No. 2 | 50477 | Form | W-8BEN (Rev. 10-2021) |
| and appearation | | ,pur use mou actions. | Cat. NO. 2 | | 1 00111 | |

- 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 (Mandatory)
 - Line 2 Country of Citizenship (Mandatory)

Note: This must be inputted as China in order to be eligible for 10% withholding tax rate.

Line 3 Insert full street address on the first line, and the City or town, state or province including post cod eon the 2nd line (Mandatory)

Note: This must be inputted as China in order to be eligible for 10% withholding tax rate.

Line 4 Insert a mailing address if it is different from your Permanent residence address (Optional) Line 6b Check the box if it is not legally required to provide your Chinese Tax Resident Identity Certificate

Line 8 Write down your date of birth (MM/DD/YYYY)

- C. PART II (Claim of Tax Treaty Benefits) Line 9 Your country of tax residency (Mandatory) Note: This must be inputted as China in order to be eligible for 10% withholding tax rate.
- D. PART III (Certification)

Number

- 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. Please tick the box "I certify that I have the capacity to sign for the person identified on line 1 of this form."

Sample 2 – Address of Residency is outside China

| Form W-8BEN | Certificate of Foreign States Tax Withholdin | | | | | | | | |
|---|--|--|--|--|---|--|--|--|--|
| (Rev. October 2021) | ► For use by individuals. | OMB No. 1545-1621 | | | | | | | |
| Department of the Treasur Internal Revenue Service | poartment of the Treasury of t | | | | | | | | |
| Do NOT use this for | | | | | Instead, use Form: | | | | |
| You are NOT an inc | | | | | W-8BEN-E | | | | |
| You are a U.S. citiz | en or other U.S. person, including a resident alien | individual | | | W-9 | | | | |
| You are a beneficial (other than persons) | owner claiming that income is effectively connect services) | eted with the conduct of | trade or business | within the Unit | ed States | | | | |
| You are a beneficial | owner who is receiving compensation for persor | nal services performed in | the United State | 3 | 8233 or W-4 | | | | |
| You are a person a | cting as an intermediary | | | | W-8IMY | | | | |
| | lent in a FATCA partner jurisdiction (that is, a Modiction of residence. | odel 1 IGA jurisdiction v | vith reciprocity), o | ertain tax acco | unt information may be | | | | |
| | ification of Beneficial Owner (see instr | ructions) | | | | | | | |
| 1 Name of indiv | idual who is the beneficial owner | | 2 Country of | citizenship | | | | | |
| CHEN Xiaowen 3 Permanent re | sidence address (street, apt. or suite no., or rural | coute) De not use a D | China | -f -dd | | | | | |
| | | route). Do not use a P. | U. Dox or in-care | -or address. | | | | | |
| | 545, Bedok North Street 3, Singapore 460545 state or province. Include postal code where app | ronriata | | Country | | | | | |
| Only of town, | state of province, include postal code whole app | торпато. | | | | | | | |
| 4 Mailing addre | ss (if different from above) | | | Singapore | | | | | |
| | | | | | | | | | |
| City or town, | state or province. Include postal code where app | ropriate. | | Country | | | | | |
| | | | | | | | | | |
| 5 U.S. taxpaye | identification number (SSN or ITIN), if required (| see instructions) | | | | | | | |
| | | 1 | | | | | | | |
| 6a Foreign tax is | lentifying number (see instructions) | 6b Check if FTIN not | legally required . | | 📙 | | | | |
| | 32747474945788974X | | | | | | | | |
| 7 Reference nu | mber(s) (see instructions) | 8 Date of birth (MM | | | | | | | |
| Part II Claim | of Tax Treaty Benefits (for chapter 3 | nurnoses only) (see | 09-12- | 1974 | | | | | |
| | he beneficial owner is a resident of China | purposes orny (occ | moductionity | within the me | aning of the income tax | | | | |
| treaty between | on the United States and that country. | | | • | | | | | |
| | and conditions (if applicable - see instructions) | : The beneficial owner is | claiming the prov | isions of Article | and paragraph | | | | |
| | of the treaty identified on line | 9 above to claim a | % rate of withho | lding on (specif | y type of income): | | | | |
| | | | | | | | | | |
| Explain the a | dditional conditions in the Article and paragraph t | the beneficial owner mee | ets to be eligible fo | or the rate of wi | thholding: | | | | |
| D | | | | | | | | | |
| | ication | | | | | | | | |
| | eclare that I have examined the information on this form and to the | | | • | | | | | |
| relates or am using th | t is the beneficial owner (or am authorized to sign for the is form to document myself for chapter 4 purposes; | ndividual that is the benef | iciai owner) or all the | income or proce | eds to which this form | | | | |
| The person named on | line 1 of this form is not a U.S. person; | | | | | | | | |
| This form relates to: | | | | | | | | | |
| | ely connected with the conduct of a trade or business in | | | | | | | | |
| | connected with the conduct of a trade or business in the | | bject to tax under ar | applicable incon | ne tax treaty; | | | | |
| | of a partnership's effectively connected taxable income | | | | | | | | |
| | nt realized from the transfer of a partnership interest sut | | | | | | | | |
| | 1 of this form is a resident of the treaty country listed on line 9 of | | - | ary between the Uni | ted States and that country; and | | | | |
| | s or barter exchanges, the beneficial owner is an exemp | | | F-1-1 | 20.1-1.2 | | | | |
| urtnermore, I authorize thi fisburse or make payment | s form to be provided to any withholding agent that has control s of the income of which I am the beneficial owner. I agree that | , receipt, or custody of the inco t I will submit a new form with | me of which I am the b in 30 days if any cert | eneticial owner or a fication made on t | iny withholding agent that can his form becomes incorrect. | | | | |
| , [| I certify that I have the capacity to sign for the person | n identified on line 1 of this t | form. | | | | | | |
| Sign Here | | | | | | | | | |
| , , | | | | | 1-30-2021 | | | | |
| _ | Signature of beneficial owner (or individual auth | orized to sign for beneficial | owner) | | MM-DD-YYYY) | | | | |
| | HEN Xiaowen | | | | | | | | |
| F | rint name of signer | | | | | | | | |
| For Paperwork Red | uction Act Notice, see separate instructions. | Cat. No. | 25047Z | Form | W-8BEN (Rev. 10-2021) | | | | |

- 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 (Mandatory)

Line 2 Country of Citizenship (Mandatory)

Note: This must be inputted as China in order to be eligible for 10% withholding tax rate.

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 (Mandatory)

Note: If this line is inputted other than China, in order to be eligible for 10% withholding tax rate, please make sure line 6 is inputted.

Line 4 Insert a mailing address if it is different from

your Permanent residence address (Optional)

Line 6a Insert your tax identifying number issued by

Chinese government (Mandatory)

Note: This information is used to demonstrate the client is still a tax resident of China. The client is required to provide "Chinese Tax Resident Identity Certificate" for verification. However, please keep in mind that the determination of whether the client is subject to 10% withholdoing tax rate is hinged on the assessment from our Compliance or external advisory.

Line 8 Write down your date of birth (MM/DD/YYYY)

- C. PART II (Claim of Tax Treaty Benefits) Line 9 Your country of tax residency (Mandatory) Note: This must be inputted as China in order to be eligible for 10% withholding tax.
- 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. Please tick the box "I certify that I have the capacity to sign for the person identified on line 1 of this form."