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| Form W-8BEN (Rev. July 2017) 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 payer. Do not send to the IRS. | OMB No. 1545-1621 |
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| Do NOT use this form if: | Instead, use Form: |
| • 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-8ECI |
| • 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-8IMY |

Note: 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. ***請用英文填寫，姓名需與護照一致**

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| Part I Identification of Beneficial Owner (see instructions) | |
| 1 Name of individual who is the beneficial owner 申請人姓名(需與護照一致的英文姓名) | 2 Country of citizenship 國籍 |
| 3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address. 長期居住地址(樓層、單位名、街道) | |
| City or town, state or province. Include postal code where appropriate. 地區、城市、郵政編碼 | Country 國家 |
| 4 Mailing address (if different from above) 郵寄地址(如與上述地址相同則不需填寫) | |
| City or town, state or province. Include postal code where appropriate. | |
| 5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions) 美國稅籍編號 | 6 Foreign tax identifying number (see instructions) 外國稅及編號 |
| 7 Reference number(s) (see instructions) 參考編號 | 8 Date of birth (MM-DD-YYYY) (see instructions) 出生日期 月/日/年 |

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| 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 居住國家 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: 解釋申請人適用協定條款之原因 | |

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| 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: | |
| <ul style="list-style-type: none">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:<ul style="list-style-type: none">(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, andFor 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. | |

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| Sign Here | 申請人簽名 Signature of beneficial owner (or individual authorized to sign for beneficial owner) | 簽屬日期 月 日 年 Date (MM-DD-YYYY) |
| | 申請人姓名完整拼音(請填寫工整) Print name of signer | Capacity in which acting (if form is not signed by beneficial owner) |