**有限責任金門縣信用合作社**

自我證明表-具控制權之人

Self-Certification Form – Controlling Person

顧客號碼：

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| --- |
| 重要提示Important Notes：   1. 金融機構執行共同申報及盡職審查作業辦法(下稱本辦法)規定，金融機構應蒐集及申報有關帳戶持有人稅務居住者身分之特定資訊。本辦法係依稅捐稽徵法第5條之1第6項訂定，其內容參考經濟合作暨發展組織發布之共同申報及盡職審查準則(下稱共同申報準則)。   Under the Regulations Governing the Implementation of the Common Standard on Reporting and Due Diligence  for Financial Institutions (“Regulations”), Financial Institutions (“FIs”) are required to collect and report certain  information about the Account Holder’s tax residency status. The Regulations are enacted pursuant to Paragraph  6, Article 5-1 of the Tax Collection Act and are drafted in reference to the Common Standard on Reporting and  Due Diligence for Financial Account Information (CRS) developed by the Organisation for Economic Co-  operation and Development (OECD)   1. 金融機構依本辦法規定取得具控制權之人之自我證明文件，以辨識具控制權之人為稅務居住者之國家/地區。金融機構依法可能將本表及相關帳戶資訊提供中華民國稅捐稽徵機關，經由政府間協定進行稅務目的金融帳戶資訊交換，提供他方國家/地區稅捐稽徵機關。   Under the Regulations, FIs obtain a self-certification form from the Controlling Person to determine the country(ies)/jurisdiction(s) in which the Controlling Person is a tax resident. The FIs may be legally obliged to pass on the information in this form and other financial information with respect to the account to the tax authorities of the Republic of China (Taiwan)(“ROC”). Such information may be provided to tax authorities of another country(ies)/jurisdiction(s) through the exchange of financial account information for tax purposes pursuant to intergovernmental agreements.   1. 帳戶持有人為消極非金融機構實體(含由另一金融機構管理且非位於應申報國或參與國之投資實體)，或由另一金融機構管理且非位於應申報國或參與國之投資實體，該等實體之具控制權之人請分別填寫此表。   If the Account Holder is a Passive NFE, or an Investment Entity that is managed by another FI and located outside a Reportable Jurisdiction or a Participating Jurisdiction, please use this separate form for each Controlling Person of these entities.   1. 標有星號（\*）欄位或部分為必填資訊。   Information in fields or parts marked with an asterisk (\*) is mandatory.   1. 如您係代理實體帳戶持有人提交自我證明表，請填寫「自我證明表-實體」，勿填寫本表。相同地，如您為個人帳戶持有人或獨資資本主，請填寫「自我證明表-個人」。   Where you need to certify on behalf of an Entity Account Holder, do not fill in this form; instead please complete a “Self-Certification Form – Entity.” Similarly, if you are an individual, sole trader or sole proprietor, please complete a “Self-Certification Form – Individual.”   1. 本表將持續有效，倘狀態變動（例如具控制權之人之稅務居住者身分變動）致所填資訊不正確或不完整，具控制權之人應通知金融機構，並更新本表。   This form will remain valid unless there is a change in circumstances relating to information, such as the Controlling Person’s tax residency status, that makes this form incorrect or incomplete. In that case, the Controlling Person must notify the FI and provide an updated self-certification form.   1. 本表相關用詞(如帳戶持有人、稅務識別碼、積極非金融機構實體、消極非金融機構實體、應申報國、參與國及具控制權之人等)，請詳本辦法。   The definition of the capitalized terms used in this form, such as Account Holder, Taxpayer Identification Number (“TIN”), Active Non-Financial Entity (“NFE”), Passive NFE, Reportable Country, Reportable Jurisdiction, Participating Jurisdiction, Controlling Person, etc. can be found in the Regulations. |

**本人僅具有中華民國稅務居住者身分，未具有美國、其他國家地區或多重國家／地區之稅務居住者身分。**

**（簽名或蓋章）**

**註:無須填寫「遵循FATCA法案身分聲明暨個資申報同意書」**

**第一部分：具控制權之人身分辨識資料**

**Part 1 Identification of a Controlling Person**

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| --- | --- |
| 具控制權之人姓名\*  Name of Controlling Person\* | 姓氏\* Last Name or Surname(s)\* |
| 名字\* First or Given Name\* |
| 中間名 Middle Name(s) |
| 現行居住地址\*  Current Residence Address\* | |  | | --- | | 室、樓層、大樓、街道、地區等(如有)  Suite, Floor, Building, Street, District (if any) |   鎮/市/省/縣/州等 Town/City/Province/County/State |
| 國家/地區 Country/Jurisdiction\* |
| 郵政編碼/郵遞區號(如有)\* Post Code/ZIP Code (if any)\* |
| 通訊地址(與現行居住地址不同時，填寫此欄)  Mailing Address (Complete if different to the Current Residence Address) | 室、樓層、大樓、街道、地區等(如有)  Suite, Floor, Building, Street, District (if any) |
| 鎮/市/省/縣/州等 Town/City/Province/County/State |
| 國家/地區 Country |
| 郵政編碼/郵遞區號(如有) Post Code/ZIP Code (if any) |
| 出生日期\*(西元日/月/年)  Date of Birth\*(dd/mm/yyyy) |  |
| 出生地  Place of Birth | 出生城市Town or City of birth |
| 出生國家/地區Country/Jurisdiction |

**第二部分：具控制權之人之相關實體帳戶\***

**Part 2 As a Controlling Person of the Entity Account Holder\***

請填寫您對其為具控制權之人之相關實體帳戶持有人名稱及稅務識別碼\*

Please enter the legal name and the TIN of the relevant Entity Account Holder of which that person is a Controlling Person.

|  |  |  |
| --- | --- | --- |
| 實體  Entity | 實體帳戶持有人名稱  Legal Name of the Entity Account Holder | 實體帳戶持有人稅務識別碼  The TIN of the Entity Account Holder |
| (1) |  |  |

如實體帳戶持有人為中華民國稅務居住者，填列統一編號(8碼，由公司、商業登記主管機關或稅籍登記所轄稅捐稽徵機關編配)。

If the Entity Account Holder is the tax resident of the ROC, the TIN is the Business Administration Number (8 digit number issued by the authorities in charge of corporation or business registration or by the tax authorities in charge of tax registration).

**第三部分：稅務居住者之國家/地區及其稅務識別碼或具相當功能之辨識碼\***

**Part 3 Country/Jurisdiction of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent \***

請於下表填寫(a)具控制權之人為稅務居住者之國家/地區，及(b)於該國家/地區稅務識別碼。

Complete the following table indicating (a) the country/jurisdiction where the Controlling Person is a tax resident and (b) the Controlling Person’s TIN for each country/jurisdiction indicated.

具控制權之人如同時為2個以上國家/地區稅務居住者，請填寫所有其為稅務居住者之國家/地區。

If the Controlling Person is a tax resident in more than one country/jurisdiction at the same time, please indicate all countries/jurisdictions of tax residence.

如具控制權之人為中華民國稅務居住者，填列稅務識別碼如下：

1. 具身分證字號者為身分證字號(10碼，由內政部戶政司編配)。
2. 具統一證號者為統一證號(10碼，由內政部移民署編配)。
3. 個人無身分證字號或統一證號者，得依稅籍編號編碼原則自行編配：(1)大陸地區人民：9＋西元出生年後2碼及出生月日4碼。(2)非屬(1)之其他個人：西元出生年月日8碼＋護照顯示英文姓名前2字母2碼

If the Account Holder is a tax resident of the ROC, his or her TIN is as follows:

* + - 1. National ID Card Number (a 10-digit code issued by the Department of Household Registration, Ministry of the Interior)
      2. UI Number (a 10-digit code issued by the National Immigration Agency, Ministry of the Interior)
      3. For those who have neither National ID Card Number nor UI Number, they may produce Tax Code themselves by

reference to the coding principle. (1) For individuals of Mainland China area: 9+yy+mm+dd(for example born on

October 25, 1985, the code would be 9851025); (2) For individuals other than the ones indicated in (1): yyyy+mm+dd + the first two letters of his or her English name in order printed on his or her passport. (for example, the Tax Code for David Caruso born on October 25, 1985, would be 19851025DA).

如無法提供稅務識別碼，於下列欄位填寫適用之理由A、B或C：

If a TIN is unavailable, fill in with the most appropriate reason among A, B and C below:

理由A –具控制權之人為稅務居住者之國家/地區未核發稅務識別碼

Reason A – The country/jurisdiction where the Controlling Person is a tax resident does not issue TINs to its residents.

理由B –具控制權之人無法取得稅務識別碼(請說明具控制權之人無法取得稅務識別碼原因)

Reason B – The Controlling Person is unable to obtain a TIN. Explain why the Controlling Person is unable to obtain a TIN if you have selected this reason.

理由C – 具控制權之人毋須提供稅務識別碼(限於該具控制權之人為稅務居住者之國家/地區國內法未要求蒐集稅務識別碼)。

Reason C – TIN is not required. Only select this reason if the domestic law of the country/jurisdiction of the Controlling Person’s tax residence does not require the collection of TINs.

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| **稅務居住者之**  **國家/地區**  **Country/Jurisdiction of tax residence** | **稅務識別碼**  **TIN** | **若無法提供稅務識別碼，填寫理由A、B或C**  **Enter reason A, B or C if no TIN is available** | **如選取理由B，說明具控制權之人 無法取得稅務識別碼之原因**  **Explain why the Controlling Person is unable to obtain a TIN if you have selected reason B** |
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**第四部分：具控制權之人類型\***

**Part 4 Type of Controlling Person\***

就第二部分所載各實體，分別擇一勾選適當類型

Tick the appropriate box to indicate the type of Controlling Person for the Entity stated in Part 2.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 實體類別  Entity Type | 具控制權之人類型  Type of Controlling Person | 實體(1)  Entity(1) | 實體(2) Entity(2) | 實體(3) Entity(3) |
| 法人  Legal Person | 直接或間接持有實體之股份、資本或權益超過25%者  Individual who exercises control over an Entity owning directly or indirectly more than 25 percent of the Entity’s shares, capital, or equities | □ | □ | □ |
| 透過其他方式對該實體行使控制權者  Individual who exercises control over the Entity through other means. | □ | □ | □ |
| 該實體之高階管理人員  Individual who holds the position of senior managing official. | □ | □ | □ |
| 信託  Trust | 委託人 Settlor | □ | □ | □ |
|  | 受託人 Trustee | □ | □ | □ |
| 信託監察人 Protector | □ | □ | □ |
| 受益人 Beneficiary | □ | □ | □ |
| 任何其他對該信託行使最終有效控制權之自然人  Any other individual who exercises ultimate effective control over the trust | □ | □ | □ |
| 除信託以外其他法律安排  Legal Arrangements other than Trust | 具相當或類似委託人地位之人  Individual in a position equivalent/similar to settlor | □ | □ | □ |
| 具相當或類似受託人地位之人  Individual in a position equivalent/similar to trustee | □ | □ | □ |
| 具相當或類似信託監察人地位之人  Individual in a position equivalent/similar to protector | □ | □ | □ |
| 具相當或類似受益人地位之人  Individual in a position equivalent/similar to beneficiary | □ | □ | □ |
| 任何其他對該安排行使最終有效控制權地位之人  Any other Individual who exercises ultimate effective control over the arrangements | □ | □ | □ |

**第五部分：聲明及簽署\***

**Part 5 Declarations and Signature\***

**本人知悉，本表所含資訊、相關具控制權之人及任何應申報帳戶資訊，將可能提供中華民國稅捐稽徵機關，經由政府間協定進行稅務目的金融帳戶資訊交換，提供給具控制權之人為稅務居住者之國家/地區。**

**I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be submitted to the tax authorities of the ROC and provided to tax authorities of countr(ies)/jurisdiction(s) in which the Account Holder is identified as a tax resident through the exchange of financial account information for tax purposes pursuant to intergovernmental agreements.**

**本人證明，與本表實體帳戶持有人相關之所有帳戶，本人為具控制權之人(或本人業經具控制權之人授權簽署本表)。**

**I certify that I am the Controlling Person (or I am authorized to sign for the Controlling Person) of all the account(s) held by the Entity Account Holder to which this form relates.**

**本人聲明，就本人所知所信，於本自我證明所為之陳述均為正確且完整。**

**I declare that all statements made in this form are, to the best of my knowledge and belief, correct and complete.**

**本人承諾，如狀態變動致影響本表第三部分所述之個人稅務居住者身分，或所載資料不正確或不完整，本人會通知有限責任金門縣信用合作社，並在狀態變動後30日內提供有限責任金門縣信用合作社一份經適當更新之自我證明表。**

**I undertake to advise Kinmen Credit Cooperative of any change in circumstances which affects the tax residency status of the individual identified in Part 1 of this form or causes the information contained herein to become incorrect or incomplete, and to provide Kinmen Credit Cooperative with a suitably updated self-certification form within 30 days of such change in circumstances.**

**簽署 Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_（親 簽）**

**身分 Capacity \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(若您不是具控制權之人，請敘明您簽署本表之身分。如您是以代 理人身分簽署此表，請檢附授權書)**

**(If you are not the Controlling Person, please indicate the capacity in which you are signing the form. If signing under a power of attorney, please also attach a certified copy of the power of attorney. )**

**日期 Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**