

致：澳門華人銀行股份有限公司
To: The Macau Chinese Bank Limited

實體自我證明表格 Entity Self-Certification Form

重要提示： Important Notes:

1. 這是由賬戶持有人向澳門華人銀行股份有限公司（「銀行」）提供的自我證明表格，以作自動交換財務賬戶資料用途。銀行可把收集所得的資料交給財政局，財政局會將資料轉交到另一稅務管轄區的稅務當局。
This is a self-certification form provided by an account holder to The Macau Chinese Bank Limited ("the Bank") for the purpose of automatic exchange of financial account information. The data collected may be transmitted by the Bank to the Financial Services Bureau for transfer to the tax authority of another jurisdiction.
2. 如賬戶持有人的稅務居民身份有所改變，應盡快將所有變更通知銀行。
An account holder should report all changes in his/ her tax residency status to the Bank.
3. 除不適用或特別註明外，必須填寫這份表格所有部份。如這份表格上的空位不夠應用，可另紙填寫。在欄/部標有星號(*)的項目為銀行須向財政局申報的資料。
All parts of the form must be completed (unless not applicable or otherwise specified). If space provided is insufficient, continue on additional sheet(s)*. Information in fields/parts marked with an asterisk (*) are required to be reported by the Bank to the Financial Services Bureau.

第一部 實體賬戶持有人的身份識別資料 (對於聯名賬戶或多人聯名賬戶，每名實體賬戶持有人須分別填寫一份表格)

Part 1 Identification of Entity Account Holder (For joint or multiple account holders, complete a separate form for each entity account holder)

- (1) 實體或分支機構的法定名稱*
Legal Name of Entity or Branch*: _____
- (2) 實體成立為法團或設立所在的稅務管轄區
Jurisdiction of Incorporation or Organization: _____
- (3) 商業登記號碼:
Business Registration Number: _____
- (4) 現時營業地址:
Current Business Address:
第 1 行 (例如: 室、樓層、大廈、街道、地區)
Line 1 (e.g. Suite, Floor, Building, Street, District) _____
第 2 行 (城市)*
Line 2 (City) * _____
第 3 行 (例如: 省、州)
Line 3 (e.g. Province, State) _____
國家*
Country * _____
郵政編碼/郵遞區號碼
Post Code/ZIP Code _____
- (5) 通訊地址 (如通訊地址與現時營業地址不同，填寫此欄)
Mailing Address (Complete if different to the current business address)
第 1 行 (例如: 室、樓層、大廈、街道、地區)
Line 1 (e.g. Suite, Floor, Building, Street, District) _____
第 2 行 (城市)*
Line 2 (City) * _____
第 3 行 (例如: 省、州)
Line 3 (e.g. Province, State) _____
國家*
Country * _____
郵政編碼/郵遞區號碼
Post Code/ZIP Code _____

第二部 實體類別

Part 2 Entity Type

在其中一個適當的方格內加上✓號，並提供有關資料。

Tick one of the appropriate boxes and provide the relevant information.

金融機構 Financial Institution	<input type="checkbox"/> 託管機構、存款機構或指明保險公司託管機構、存款機構或特定保險公司。 Custodial Institution, Depository Institution or Specified Insurance Company <input type="checkbox"/> 投資實體，但不包括由另一金融機構管理（例如：擁有酌情權管理投資實體的資產）並位於澳門特區以外管轄區的投資實體。 Investment Entity, except an investment entity that is managed by another financial institution (e.g. with discretion to manage the entity's assets) and located in a non-participating jurisdiction
積極非金融實體 Active NFE	<input type="checkbox"/> 該非金融實體的股票經常在 _____（一個具規模證券市場）進行買賣。 NFE the stock of which is regularly traded on _____, which is an established securities market <input type="checkbox"/> _____ 的有關連實體，該有關連實體的股票經常在 _____（一個具規模證券市場）進行買賣 Related entity of _____, the stock of which is regularly traded on _____, which is an established securities market <input type="checkbox"/> 政府實體、國際組織。 Governmental entity, Autoridade Cambial de Macau, international organization <input type="checkbox"/> 除上述以外的積極非金融實體（請說明：_____）。 Active NFE other than the above (Please specify: _____)
消極非金融實體 Passive NFE	<input type="checkbox"/> 由另一金融機構管理並位於非參與司法管轄區的投資實體。 Investment entity that is managed by another financial institution and located in a non-participating jurisdiction <input type="checkbox"/> 不屬積極非金融實體的非金融實體。 NFE that is not an active NFE

第三部 控權人 (如實體賬戶持有人是消極非金融實體，填寫此部)

Part 3 Controlling Persons (Complete this part if the entity account holder is a passive NFE)

就賬戶持有人，填寫所有控權人的姓名在列表內。就法人實體，如行使控制權的並非自然人，控權人會是該法人實體的高級管理人員。

Indicate the name of all controlling person(s) of the account holder in the table below. If no natural person exercises control over an entity which is a legal person, the controlling person will be the individual holding the position of senior managing official.

每名控權人須分別填寫一份“控權人自我證明表格”

Complete “Controlling Person Self-Certification Form” for each controlling person.

(1)	(6)
(2)	(7)
(3)	(8)
(4)	(9)
(5)	(10)

第四部 居留司法管轄區及稅務編號或具有等同功能的識別編號(以下簡稱「稅務編號」)*

Part 4 Jurisdiction of Residence and Taxpayer Identification Number or its Functional Equivalent (“TIN”)*

提供以下資料，列明(a)賬戶持有人的居留司法管轄區，亦即賬戶持有人的稅務管轄區(澳門包括在內)及(b)該居留司法管轄區發給賬戶持有人的稅務編號。列出所有(不限於5個)居留司法管轄區。

Complete the following table indicating (a) the jurisdiction of residence (including Macau) where the account holder is a resident for tax purposes and (b) the account holder's TIN for each jurisdiction indicated. Indicate all (not restricted to five) jurisdictions of residence.

如賬戶持有人是澳門稅務居民，稅務編號是其澳門身份證號碼。

If the account holder is a tax resident of Macau, the TIN is the Macau Identity Card Number.

如沒有提供稅務編號，必須填寫合適的理由：

理由 A – 賬戶持有人的居留司法管轄區並沒有向其居民發出稅務編號。

理由 B – 賬戶持有人不能取得稅務編號。如選取這一理由，解釋賬戶持有人不能取得稅務編號的原因。

理由 C – 賬戶持有人毋須提供稅務編號。居留司法管轄區的主管機關不需要賬戶持有人披露稅務編號。

If a TIN is unavailable, provide the appropriate reason A, B or C:

Reason A – The jurisdiction where the account holder is a resident for tax purposes does not issue TINs to its residents.

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

Reason C – TIN is not required. Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.

居留司法管轄區 Jurisdiction of Residence	稅務編號 TIN	如沒有提供稅務編號， 勾選理由 A、B 或 C Tick Reason A, B or C if no TIN is available	如選取理由 B，必須解釋賬戶持有人不能取得稅務編號的原因 Explain why the account holder is unable to obtain a TIN if you have selected Reason B
(1)		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
(2)		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
(3)		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
(4)		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
(5)		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	

備註:

Remark: _____

第五部 聲明及簽署

Part 5 Declarations and Signature

本人知悉及同意，銀行可根據有關交換財務賬戶資料的適用法律條文，(a)收集本表格所載資料並可備存作自動交換財務賬戶資料用途及(b)把該等資料和關於賬戶持有人及任何須申報賬戶的資料向澳門特別行政區政府財政局申報，從而把資料轉交到賬戶持有人的居留司法管轄區的稅務當局。

I acknowledge and agree that (a) the information contained in this form is collected and may be kept by the Bank for the purpose of automatic exchange of financial account information, and (b) such information and information regarding the account holder and any reportable account(s) may be reported by the Bank to the Financial Services Bureau of the Government of the Macau Special Administrative Region and exchanged with the tax authorities of another jurisdiction or jurisdictions in which the account holder may be resident for tax purposes, pursuant to the applicable legal provisions for exchange of financial account information.

本人證明，就與本表格所有相關的賬戶，本人獲賬戶持有人授權簽署本表格。本人現提交本表格，連同由控權人及/或其被授權人*簽署及註明日期的“控權人自我證明表格”(如有)共_____份。

I certify that I am authorized to sign for the account holder in respect of all the account(s) to which this form relates. I hereby submit this form together with _____ copy(ies) of the "Controlling Person Self-Certification Form" (if any), duly signed and dated by the Controlling Person(s) and/or authorized person(s).

本人承諾，如情況有所改變，以致影響本表格第1部所述的實體的稅務居民身份，或引致本表格所載的資料不正確，本人會通知銀行，並會在情況發生改變後30日內，向銀行提交一份已適當更新的自我證明表格。

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

本人聲明就本人所知所信，本表格內所填報的所有資料和聲明均屬真實、正確和完備。

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

* 如以被授權人身份簽署這份表格，須夾附該授權書的核證副本。

*If signing under a power of attorney, attach a certified copy of the power of attorney.

代表客戶簽署，簽署日期為 Signed for and on behalf of the Customer on _____ 日/月/年 Date/Month/Year

簽署 Signature _____ 日期 Date ____/____/____	注意Note: 請說明你的身份。 Please indicate your qualification. 姓名 Name : _____ 身份 Qualification. _____ 如果你是以被授權人身份簽署本表格，須附同該授權書的認證副本。 If you sign this form as an authorized person(s), please provide a copy of the letter of authorization.
	備註 Note : 就本表格所採用術語的釋義，請參考《金融帳戶信息的通用報送標準及盡職調查程序》第八條。 For explanation of the terms adopted in this form, please refer to the article 8 of «Norma Comum de Comunicação e Procedimentos de Diligência Devida para Informações sobre Contas Financeiras».

For Bank Use Only		
Customer No.:		
S.V.	Maker	Officer