

# 臺銀人壽保險股份有限公司

## 自我證明表-具控制權之人

### Self-Certification Form – Controlling Person

#### 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 Organization for Economic Cooperation and Development (OECD).

2. 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”) and they may exchange this information with tax authorities of another country(ies)/jurisdiction(s) pursuant to intergovernmental agreements to exchange financial account information for tax purposes.

3. 帳戶持有人為消極非金融機構實體，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 separate form for each Controlling Person of these entities.

4. 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.

5. 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.

6. 本表相關用詞(如帳戶持有人、稅籍編號、積極非金融機構實體、消極非金融機構實體、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, TIN, Active Non-Financial Entity (“NFE”), Passive NFE, Reportable Country, Reportable Jurisdiction, Participating Jurisdiction, Controlling Person, etc. can be found in the Regulations.

第一部分：具控制權之人身分辨識資料 Part 1 : Identification of a Controlling Person	
具控制權之人姓名* Name of Controlling Person*	姓氏* Last Name or Surname(s)*
	名字* First of Given Name*
	中間名 Middle Name(s)
現行居住地址* Current Residence Address*	(如有室、樓層、大樓、街道、地區等)* (e.g. Suite, Floor, Building, Street, District, if any)*
	(如有鎮、市、省、縣、州等)* (e.g. 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)	(如室、樓層、大樓、街道、地區) (e.g. Suite, Floor, Building, Street, District)
	(如鎮、市、省、縣、州) (e.g. Town/City/Province/County/State)
	國家/地區 Country
	郵政編碼/郵遞區號 Post Code/ZIP Code
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籍編號 Please enter the legal name and the Tax Identification Number (TIN) of the relevant Entity Account Holder of which you are a controlling person.		
實體 Entity	實體帳戶持有人名稱 Legal Name of the Entity Account Holder	實體帳戶持有人稅籍編號 The TIN of the Entity Account Holder
(1)		
(2)		
(3)		
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/地區及其稅籍編號或具相當功能之辨識碼（”稅籍編號”）\***  
**Part 3 : Country/Jurisdiction of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent number (“TIN”)\***

■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/地區稅籍編號。

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，填列稅籍編號如下：

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，以現行稅籍編號(大陸地區人民為 9+西元出生年後 2 碼及出生月日 4 碼；其餘情形為西元出生年月日 8 碼+護照顯示英文姓名前 2 字母 2 碼)方式編配。

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. Uniform ID Number (a 10-digit code issued by the National Immigration Agency, Ministry of the Interior)
3. The current Taxpayer Code Number for those who have neither National ID Card Number nor Uniform ID Number is assigned as follows: Mainland China citizens are coded as 9+yy+mm+dd (for example born on October 25, 1985, the code would be 9851025); for other foreigners, yyyy+mm+dd + the first two letters of his or her English name in order printed on his or her passport. (for example, the code for David Caruso born on October 25, 1985, would be 19851025DA)

■如無法提供稅籍編號，於下列欄位填寫適用之理由 A、B 或 C：

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

理由 A – 具控制權之人為稅務居住者之國家/地區未核發稅籍編號  
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籍編號(請說明具控制權之人無法取得稅籍編號原因)  
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 – 帳戶持有人毋須提供稅籍編號(限於該帳戶持有人為稅務居住者之國家/地區國內法未要求蒐集稅籍編號)  
Reason C – TIN is not required. Only select this reason if the domestic law of the relevant country/jurisdiction of tax residence does not require the collection of TIN.

稅務居住者之國家/地區 Country/Jurisdiction of tax residence	稅籍編號 TIN	若無法提供稅籍編號， 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 取得稅籍編號之原因 Explain why the Controlling Person is unable to obtain a TIN if you have selected reason B

**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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	該實體之高階管理人員 Individual who holds the position of senior managing official.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
信託 Trust	委託人 Settlor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	受託人 Trustee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	信託監察人 Protector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	受益人 Beneficiary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	具相當或類似受託人地位之人 Individual in a position equivalent/similar to trustee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	具相當或類似信託監察人地位之人 Individual in a position equivalent/similar to protector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	具相當或類似受益人地位之人 Individual in a position equivalent/similar to beneficiary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 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 Controlling Person and any Reportable Account(s) may be provided to the tax authorities of the ROC and exchanged with tax authorities of another country(ies)/jurisdiction(s) in which the Controlling Person may be a tax resident pursuant to intergovernmental agreements to exchange financial account information for tax purposes.

■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 declaration 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一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，本人會通知臺銀人壽保險股份有限公司，並在狀態變動後 **30** 日內提供臺銀人壽保險股份有限公司一份經適當更新之自我證明表。

I undertake to advise BankTaiwan Life Insurance Co., Ltd. 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 BankTaiwan Life Insurance Co., Ltd. with a suitably updated self-certification form within **30** days of such change in circumstances.

簽署 Signature \_\_\_\_\_

日期 Date \_\_\_\_\_

姓名 Print Name \_\_\_\_\_

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. )