記入サンプル

サンプルです。

配当金等のサンプルには なりませんのでご注意ください。

ロイヤリティ収入のための

Part I 受益者の特定

- 1 申請者個人の正式名
- 3 現住所
- 4 郵送先住所が3と異なる 場合の住所
- 5 米国のソーシャルセキュリティー 番号、もしくは米国の納税者番号 を持っている場合
- 7 参照番号 例) みなし事業体の名前と口座番号

Part II 租税条約の恩典の請求

- 9 条約国の居住者
- 10 受益者が源泉徴収の対象となる ために満たす規約の条項と 源泉所得税率と所得の種類

Part III 証明

1 手書きによる署名 または電子署名

12名前

Form W-8BEN

(Rev. October 2021) Department of the Treasury States Tax Withholding and Reporting (Individuals) ► For use by individuals. Entities must use Form W-8BEN-E.

Certificate of Foreign Status of Beneficial Owner for United

► Go to www.irs.gov/FormW8BEN for instructions and the latest information.

OMB No. 1545-1621

| Internal Revenue Service | ► Give this form to the withhole | ding agent or payer. Do not send to the IR | S. | |
|---|--|--|--|------------------------------|
| Do NOT use this form | if: | | Instead, use Form | _ 1: |
| You are NOT an indivi- | dual | | W-8BEN- | E |
| You are a U.S. citizen | or other U.S. person, including a resident alie | en individual | W- | .9 |
| | wner claiming that income is effectively conne | | | |
| • | ervices) | | | |
| • You are a beneficial owner who is receiving compensation for personal services performed in the United States | | | | |
| You are a person actir | ng as an intermediary | | W-8IM | Y _ |
| Note: If you are resider provided to your jurisdi | at in a FATCA partner jurisdiction (that is, a ${\tt N}$ ction of residence. | Model 1 IGA jurisdiction with reciprocity), ce | rtain tax account information may b | е |
| Part I Identific | cation of Beneficial Owner (see ins | tructions) | | <u>-</u> |
| | ual who is the beneficial owner | 2 Country of ci | tizenship | _ 2 国籍 |
| Taro Urashima | | Japan | | |
| | dence address (street, apt. or suite no., or rura | al route). Do not use a P.O. box or in-care- | of address. | |
| 1-2-3 Ryugu-ma | | | Country | _ |
| Umino City.Tok | ate or province. Include postal code where ap | ppropriate. | Country Japan | |
| | (if different from above) | | Заран | _ |
| N / A | (ii diiisisii iisiii dassvo) | | | |
| City or town, sta | ate or province. Include postal code where ap | propriate. | Country | - - ロオの姉科老 来 与 |
| N/A | | | N/A | a 日本の納税者番号 |
| 5 U.S. taxpayer ic | lentification number (SSN or ITIN), if required | (see instructions) | | - (マイナンバー) |
| N/A | | | | 提出しない場合は |
| | ntifying number (see instructions) | 6b Check if FTIN not legally required . | | 理由を記入 |
| 1234 5678 9012 | | O Data of high (MMA DD)0000 (see in | | b FTIN が法的に |
| 7 Reference numb | per(s) (see instructions) | 8 Date of birth (MM-DD-YYYY) (see in | structions) | 必要でない場合に |
| Part II Claim o | of Tax Treaty Benefits (for chapter 3 | B purposes only) (see instructions) | | チェック |
| | beneficial owner is a resident of Japan | 1 1 27 1 | within the meaning of the income tax | × 🔞 生年月日 |
| treaty between | the United States and that country. | | · · | ● 工十万口 |
| 10 Special rates a | nd conditions (if applicable - see instructions | | | 金融口座関係なの |
| 12(1) | of the treaty identified on line | e 9 above to claim a <mark>0.0</mark> % rate of withhold | ling on (specify type of income): | で記入不要 |
| | icome - design/photo/other | | | |
| Explain the add | itional conditions in the Article and paragraph | n the beneficial owner meets to be eligible for | the rate of withholding: | _ |
| Part III Certific | ation | | | _ |
| | are that I have examined the information on this form and to the | ne best of my knowledge and belief it is true, correct, and corr | nolete I further certify under penalties of periury that | — at: |
| I am the individual that is | the beneficial owner (or am authorized to sign for the orm to document myself for chapter 4 purposes; | · · · · · · · · · · · · · · · · · · · | | • |
| • | e 1 of this form is not a U.S. person; | | | |
| This form relates to: | | | | |
| (a) income not effectively | connected with the conduct of a trade or business | in the United States; | | |
| (b) income effectively cor | nnected with the conduct of a trade or business in the | he United States but is not subject to tax under an | applicable income tax treaty; | |
| (c) the partner's share of | a partnership's effectively connected taxable incom | ne; or | | |
| ., . | realized from the transfer of a partnership interest su | , | | |
| • | of this form is a resident of the treaty country listed on line 9 c | · ,, | ty between the United States and that country; an | id |
| | or barter exchanges, the beneficial owner is an exem | | | |
| Furthermore, I authorize this for disburse or make payments of | orm to be provided to any withholding agent that has controlled the income of which I am the beneficial owner. I agree the | at I will submit a new form within 30 days if any certifi | neficial owner or any withholding agent that car cation made on this form becomes incorrect | 1 L |
| , | 私は、このフォームの1行目に記載されている人物のために | に考名する能力を有していることを証明します。 | | |

Taro Urashima Print name of signer

Sign Here

I certify that I have the capacity to sign for the person identified on line 1 of this form.

Signature of beneficial owner (or individual authorized to sign for beneficial owner)

Date (MM-DD-YYYY)

13署名日

12-01-2030