

Manulife (Macau) Pension Fund Scheme
Entity Tax Residency Self-Certification Form (CRS and FATCA)
宏利 (澳門) 退休金計劃
實體稅務居民身份自證證明表格
《通用報送標準及海外帳戶稅收合規法案》

Notes :

- (1) This is a self-certification provided by you to Manulife (International) Limited ("the Management Company") for the purpose of Automatic Exchange of Financial Account Information ("AEOI") in compliance with tax law and regulations (including but not limited to the Law No. 5/2017 "Legal Regime for the Exchange of Tax Information", Chief Executive Resolution No. 211/2017, the Annex of the Chief Executive Resolution No. 232/2020 and regulations based on the Organisation for Economic Co-operation and Development (OECD) Common Reporting Standard (CRS) for automatic exchange of information and the Agreement between the Government of the United States of America and the Government of the Macau Special Administrative Region of the People's Republic of China for Cooperation to Facilitate the Implementation of FATCA). The data collected may be transmitted by Management Company to the United States Internal Revenue Service, or the Macau Financial Services Bureau which may further exchange such information to the competent authority of another reportable jurisdiction.
- (2) Please complete this form where you need to self certify on behalf of an entity account holder. Entity refers to all corporations or partnerships (excluding sole proprietors). If you are a sole proprietor, please complete a "Manulife (Macau) Pension Fund Scheme Individual Tax Residency Self-Certification Form (CRS and FATCA)".
- (3) As a financial institution, Management Company is not allowed to give tax or legal advice. If you have any questions regarding your tax residency, please consult your tax adviser or visit the OECD and Financial Services Bureau AEOI website respectively for more CRS and related information.
- (4) This self-certification will remain valid unless there is any change in circumstances relating to the tax residency status of the Entity identified in this self-certification. You must notify Management Company within 30 days if there is any change in circumstances that makes any of the information provided in any parts of this self-certification form incorrect or incomplete and provide an updated self-certification form.
- (5) Each Controlling Person of a Passive Non-Financial Entity is required to submit a separate self-certification form.
- (6) Please read the Manulife Personal Information Collection Statement ("Statement") before you provide the information. The Statement is also available on Manulife's website (www.manulife.com.hk). The Statement will cover all information collected hereunder and such other information under Manulife's record from time to time. By submitting the information/documents requested in this form, you agree to the usage and transfer of such information/documents as described in the Statement which shall include any data usage/transfer for CRS and FATCA purpose.
- (7) Completed form should be submitted by mail to "Macau Administration Office, Manulife (International) Limited, Avenida de Almeida Ribeiro No. 61, Circle Square, 14 andar A, Macau."

注意事項：

- (1) 這是您向宏利人壽保險 (國際) 有限公司 (「管理公司」) 提供的自證證明, 以作金融帳戶信息自動交換用途以遵守稅務法律及規例 (包括但不限於《第5/2017號法律〈稅務信息交換法律制度〉》, 第211/2017號行政長官批示, 第232/2020號行政長官批示附件和根據與稅務信息交換資料有關的經濟合作與發展組織 (OECD) 《通用報送標準》 (CRS) 的規則及澳門特別行政區政府與美國政府簽定的《跨政府協議》)。管理公司可把收集所得的資料交給美國國稅局, 或澳門財政局, 澳門財政局可將資料交到另一司法管轄區的主管當局。
- (2) 若您代表實體帳戶持有人作出自證證明, 請填妥此表格。「實體」為所有公司或合夥企業 (獨資經營人士除外)。如您是獨資經營人士, 請填寫「宏利 (澳門) 退休金計劃個人稅務居民身份自證證明表格《通用報送標準及海外帳戶稅收合規法案》」。
- (3) 作為金融機構, 管理公司不獲允許提供稅務或法律意見。若您對您的稅務居民身份有任何疑問, 請諮詢專業稅務顧問或瀏覽OECD及澳門財政局有關金融帳戶信息自動交換的網頁, 以獲取更多CRS及相關資料。
- (4) 這自證證明是有效文件除非您的稅務居住地相關的情況有所改變。如情況有所改變, 以致影響本自證證明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或不完整, 您必須在情況有所改變後的30天內通知管理公司有關的改變並提供最新的自證證明。
- (5) 每位消極非金融實體的控制人均需分別遞交一份自證證明。
- (6) 在您提供資料前, 請細閱有關《宏利個人資料收集聲明》 (「聲明」)。該聲明同時載於宏利網站 (www.manulife.com.hk)。該聲明將涵蓋此中收集的所有資料, 以及不時記錄於宏利檔案中的此等其他資料。一經提交本表格所要求的資料/文件, 代表您同意此等資料/文件可按聲明所述被使用及轉移, 包括因CRS及FATCA而需作出的資料使用/轉移。
- (7) 請將填妥的表格郵寄至「澳門新馬路61號永光廣場14樓A宏利人壽保險 (國際) 有限公司澳門分行行政部」。

A. Employer Details 僱主資料

1. Employer Name 僱主名稱: _____
2. Place of Incorporation : _____
公司註冊地
3. Business Registration Number : _____
商業登記號碼
4. Group Policy No. 團體保單編號 : _____ Sub-Group Number 分組編號 : **01**
5. Address: _____
地址

Flat/Rm 室	Floor 樓	Block 座
Name of Building 大廈名稱		
Name of Estate 屋村名稱		
Number and Name of the Street 街道名稱及號碼		
Town / District 市鎮 / 區域		
City 城市#	Postal Code 郵寄代碼#	Country 國家#

For overseas address only 只適用於海外地址

The address provided above will be considered as the up-to-date information and superceded the existing record.
 以上提供的地址將被視為最新資料並用以更新現有記錄。

B. Entity Tax Status 實體稅務狀況

The Entity mentioned in this form refers to corporations or partnerships (excluding sole proprietors). If you are a sole proprietor, please complete "Manulife (Macau) Pension Fund Scheme Individual Tax Residency Self-Certification Form (CRS and FATCA)".

此表格所指之「實體」為公司或合夥企業(獨資經營人士除外)。如您是獨資經營人士,請填寫「宏利(澳門)退休金計劃個人稅務居民身份自證證明表格(通用報送標準及海外帳戶稅收合規法案)」。

To view the "Meaning of the Terms and Expressions used in Self-Certification Forms", simply scan the QR Code.

請掃描此二維碼以參閱「自證證明表格內採用的名詞及措辭釋義」。



(CRS-DEF_Mac)

Please list all jurisdictions where the Entity is a resident for tax purposes and Taxpayer Identification Number or its Functional Equivalent (TIN) for each jurisdiction. If the space provided is insufficient, please provide it in the below format on additional sheet(s). Please refer to OECD website at: <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> or simply scan the QR code for tax residency related information.

請列明實體在當地為符合稅務目的之居民的所有司法管轄區,以及該司法管轄區發出的稅務編號或具有等同功能的識辨編號(TIN)。如下列位置不敷應用,請按以下格式另加新頁。請參考OECD網站:(<http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency>)或掃描此二維碼以獲取稅務居民相關資料。



(OECD-TR)

Jurisdiction of Tax Residency 稅務居民司法管轄區	TIN 稅務編號	If no TIN available, please indicate Reason A, B or C below 若未能提供稅務編號,請於下方填上理由A、B或C	Please explain why you are unable to obtain a TIN if you selected Reason B 若您選擇理由B,請在下方解釋無法取得稅務編號的原因
1			
2			
3			

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

理由 A - 實體所屬的稅務居民司法管轄區沒有向其居民發出稅務編號。

Reason B - The Entity is unable to obtain a TIN. (Please explain why you are unable to obtain TIN in the above table if you have selected this reason.)

理由 B - 實體無法獲得稅務編號。(若您選擇這理由,請在上表解釋您無法獲得稅務編號的原因。)

Reason C - No TIN is required. (Note: Only select this reason if the authority of the relevant jurisdiction of residence does not require the TIN to be disclosed.)

理由 C - 無需稅務編號。(註:只有在相關司法管轄區的主管當局不需要披露該司法管轄區發出的稅務編號方可選擇這理由。)

C. Entity Type 實體類別

Please ✓ one of the appropriate boxes and provide the relevant information. 在其中一個適當的空格內加上 ✓ 號,並提供有關資料。

If you are not sure about your entity type, please consult your legal or tax adviser, or scan the QR code or visit

<https://declaration-e-assistant.manulife.com/> for help.

如果您不確定您的實體類別,請諮詢您的法律或稅務顧問,或掃描此二維碼或瀏覽 <https://declaration-e-assistant.manulife.com/> 以獲取幫助。



(E-Assistant)

Financial Institution 金融機構	<input type="checkbox"/> (1a) Custodial Institution, Depository Institution or Specified Insurance Company 託管機構、存款機構或特定保險公司 <input type="checkbox"/> (1b) 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 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)並位於非參與稅務管轄區的投資實體
Active Non-Financial Entity ("NFE") 積極非金融實體	<input type="checkbox"/> (2a) NFE the stock of which is regularly traded on _____, which is an established securities market 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 <input type="checkbox"/> (2b) Related entity of _____, the stock of which is regularly traded on _____, which is an established securities market 為 _____ 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 <input type="checkbox"/> (2c) NFE is a governmental entity Monetary Authority of Macau, an international organization, a central bank, or an entity wholly owned by one or more of the foregoing entities 政府機構、澳門金融管理局國際組織、中央銀行或由前述的實體全權擁有的公共部門及機構 <input type="checkbox"/> (2d) Active NFE other than the above (Please specify _____) 除上述以外的積極非金融實體(請說明 _____)
Passive NFE 消極非金融實體	<input type="checkbox"/> (3a) Investment entity that is managed by another financial institution and located in a non-participating jurisdiction 位於非參與稅務管轄區並由另一金融機構管理的投資實體 <input type="checkbox"/> (3b) NFE that is not an active NFE 不屬積極非金融實體的非金融實體 For Passive NFE, Tax Residency Self-Certification for each Controlling Person is required. Simply scan the QR code to download the form. 每位消極非金融實體的控制人需提供其稅務居民身份自證證明。請掃描此二維碼下載有關表格。



(CP Self-Cert)

D. Declaration and Acknowledgement 聲明及確認

I/We declare that the information given and all statements made in this self-certification (which includes any separate sheet(s)) are, to the best of my knowledge and belief, true, correct and complete.

本人/吾等聲明就本人所知所信，本自證證明(包括使用另外紙張)內所填報的所有資料和聲明均屬真實、正確及完備。

I/We understand that the information supplied by me/us is covered by the full provisions of the terms and conditions governing the account holder's relationship with Management Company setting out how Management Company may use and share the information supplied by me/us.

本人/吾等明白，本人/吾等提供之資料受管限帳戶持有人與管理公司之間關係的全部條款及條件規定所限，該等規定列明了管理公司可如何使用及分享本人/吾等提供之資料。

I/We undertake to advise Management Company of any change in circumstances which affects the tax residency status of the Entity identified in this self-certification or causes the information contained herein to become incorrect or incomplete, and to provide Management Company with a suitably updated self-certification within 30 days of such change in circumstances.

本人/吾等承諾，如情況有所改變，以致影響本自證證明所述的的實體稅務居民身份，或引致本自證證明所載的資料不正確或不完整，本人/吾等會通知管理公司，並會在情況發生改變後30天內，向管理公司提交一份適當更新的自證證明。

I/We acknowledge and agree that (a) the information contained in any parts of this self-certification, the Form W-9 or other W-series forms provided regarding the Applicant is collected and may be kept by Management Company for the purpose of automatic exchange of financial account information and the Foreign Account Tax Compliance Act (FATCA) and (b) such information and information regarding the account holder and any reportable account(s) may be reported by Management Company to the the United States Internal Revenue Service, or Financial Services Bureau of the Government of the Macau Special Administrative Region and exchanged with the competent authorities of a reportable jurisdiction(s) in which the account holder may be a resident for tax purposes, pursuant to the legal provisions for exchange of financial account information provided under the Law No. 5/2017 "Legal Regime for the Exchange of Tax Information", Chief Executive Resolution No. 211/2017, the Annex of the Chief Executive Resolution No. 232/2020 and the Agreement between the Government of the United States of America and the Government of the Macau Special Administrative Region of the People's Republic of China for Cooperation to Facilitate the Implementation of FATCA and (c) I/We agree to the obligation that the account holder must comply with requests made by Management Company to comply with the CRS (AEOI) and FATCA requirements under the Law of Financial Services Bureau and/or applicable laws and regulations, and such obligation forms the basis of the account to be opened.

本人/吾等確認及同意，管理公司可根據《第5/2017號法律〈稅務信息交換法律制度〉》，第211/2017號行政長官批示，第232/2020號行政長官批示附件有關交換金融帳戶資料的法律條文及澳門特別行政區政府與美國政府簽定的《跨政府協議》，(a)收集本自證證明、W-9 表格或其他 W 系列表格任何部分所載資料並可備存作金融帳戶信息自動交換用途及(b)把該等資料和關於帳戶持有人及任何須報送帳戶的資料向美國國稅局，或澳門特別行政區政府財政局報送，從而把資料交換到帳戶持有人所屬的稅務司法管轄區的主管當局及(c)本人/吾等同意帳戶持有人必須遵守管理公司的要求以便遵守財政局法律及/或適用法律及規例的CRS (AEOI) 及 FATCA規定，並為日後開立帳戶之基礎。

I/We confirm that I have received and read the Manulife Personal Information Collection Statement ("Statement"). I/We understand and agree to the Statement.

本人/吾等已收訖及閱畢《宏利個人資料收集聲明》(「聲明」)。本人/吾等清楚明白及同意該聲明之內容。

I/We confirm that I have read, understand and agree to all the notes and information stated in this form.

本人/吾等確認本人已閱畢、明白並同意本表格所載的所有資料。

I/ We certify that I/we am/are authorised to sign for the Entity of all the account(s) to which this form relates.

本人/吾等證明，就與本表格所有相關的帳戶，本人/吾等獲帳戶持有人授權簽署本表格。

Signature of Company Director ^ with Company Chop 公司董事^簽署及公司印章

Date 日期

Full Name in Block Letter 全名(正楷)

Capacity 身份

^ For Corporation : Signed by the Company Director appears in the latest Annual Return.

公司：由刊於最近之周年報表上的公司董事簽署。

For Partnership : Signed by the Partner.

合夥企業：由合夥人簽署。

For Unincorporated body (e.g. association and societies): an individual who ultimately owns or controls this employer (company) under this Sub-scheme.

非法人團體(如會社及社團)：由最終擁有或控制此附屬計劃下之僱主(公司)的個人簽署。

If this Form is not signed by the respective person as listed above, please provide his/her Authorization Letter or the concerned Board Resolution.

如本表格並非由上述相關人士簽署，請提供其授權書或相關董事局決議。