# วิธีการกรอก W8-BEN

# \*\*กรณีเป็นชาวต่างชาติให้ใช้ที่อยู่ติดต่อได้ในไทย\*\*

#### .... W-8BEN

(Rev. October 2021)

#### Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

OMB No. 1545-1621

(Hev. O	ctober 2021)	► For use by individuals.			OMB No. 1545-1621		
Department of the Treasury Internal Revenue Service		► Go to www.irs.gov/FormW8BEN for instructions and the latest information.  ► Give this form to the withholding agent or payer. Do not send to the IRS.					
	OT use this form		ng agent or payer. Do n	ot send to the ins.	Instead, use Form:		
	are NOT an indiv				W-8BEN-E		
			Individual				
		or other U.S. person, including a resident alien			W-9		
	are a beneficial of er than personal	writer claiming that income is effectively connect services)	ted with the conduct of t	rade or business within the Uni	ted States W-8ECI		
<ul> <li>You</li> </ul>	are a beneficial o	wner who is receiving compensation for person	nal services performed in	the United States	8233 or W-4		
<ul><li>You</li></ul>	are a person acti	ng as an intermediary			W-8IMY		
		nt in a FATCA partner jurisdiction (that is, a Mo liction of residence.	odel 1 IGA jurisdiction wi	th reciprocity), certain tax acc	ount information may be		
Par	Identifi	ication of Beneficial Owner (see instr	ructions)				
1		lual who is the beneficial owner	2 Country of citizenship				
1 ชื่อ-นามสกล				2. ประเทศที่ถือสัญชาติ ยก	เต้วอย่างเช่น Thailand		
3	Permanent resi	dence aggress เรเต <mark>อ</mark> ย์, apt. or suite no., or rural 3. ที่อยู่ตามทะเบียนบ้าน ในส่วนนี้เป็น บ้าเ					
	City or town, st	ate or province. Include postal code where appr	•	Country			
		อำเภอ จังหวัด รหัสไปรษณีย์		3. ในส่วนนี้เ	ป็นประเทศ เช่น Thailand		
4	Mailing address	s (if different from above)					
		<mark>4. ที่อยู่ปัจจุบัน (หากเหมือนในทะเบียนบ้า</mark>		<mark>i)</mark>			
	City or town, st	ate or province, include postal code where appr อำเภอ จังหวัด รหัสไปรษณีย์	ppropriate. Cour		untry ในส่วนนี้เป็นประเทศ เช่น Thailand		
				4. tudouu			
5	U.S. taxpayer i	dentification number (SSN or ITIN), if required (s	ee instructions)				
6a	Eorgian tay ida	ntifying number (see instructions)	6b Check if FTIN not I	anally required			
oa	roreign tax ide	6 เลขบัตรประชาชน	OD CHECK II FIIN HOLL	egally required			
7	Reference num	e number(s) (see instructions)  8 Date of birth (MM-DD-YYYY) (see instructions)					
	<mark>1995</mark>						
Part	Claim (	of Tax Treaty Benefits (for chapter 3)					
9	9 I certify that the beneficial owner is a resident of <mark>ในส่วนนี้เป็นประเทศที่ถือสัญชาติเช่น Thailand</mark> within the meaning of the i						
		the United States and that country.					
10	Special rates	claiming the provisions of Articl					
		of the treaty identified on line s	above to claim a	% rate of withholding on (speci	ty type of income):		
	Explain the add	fitional conditions in the Article and paragraph t	he beneficial owner meet	s to be eligible for the rate of w	ithholding:		
				- 10 00 00 group to 10 10 10 10 10 10 10 10 10 10 10 10 10			
Part	Certific	eation					
Under po	enalties of perjury, I dec	slare that I have examined the information on this form and to the	best of my knowledge and belief it	is true, correct, and complete. I further cer	tify under penalties of perjury that:		
		s the beneficial owner (or am authorized to sign for the	individual that is the benefic	ial owner) of all the income or proce	eds to which this form		
	_	form to document myself for chapter 4 purposes; ne 1 of this form is not a U.S. person;					
	form relates to:	ne i oi ula ionii ia noca o.o. person,					
		y connected with the conduct of a trade or business in	the United States;				
-		nnected with the conduct of a trade or business in the		ect to tax under an applicable inco	me tax treaty;		
(c) th	e partner's share of	f a partnership's effectively connected taxable income;	; or				
(d) th	e partner's amount	realized from the transfer of a partnership interest sub	ject to withholding under sec	ction 1446(f);			
<ul> <li>The p</li> </ul>	erson named on line 1	of this form is a resident of the treaty country listed on line 9 of	the form (if any) within the meanin	g of the income tax treaty between the Ur	ited States and that country; and		
<ul> <li>For b</li> </ul>	proker transactions	or barter exchanges, the beneficial owner is an exemp	t foreign person as defined in	n the instructions.			
Furthern disburse	nore, I authorize this f e or make payments o	orm to be provided to any withholding agent that has control, f the income of which I am the beneficial owner. I agree that	, receipt, or custody of the incon I will submit a new form within	ne of which I am the beneficial owner or n 30 days if any certification made on	any withholding agent that can this form becomes incorrect.		
Sian	Here	I certify that I have the capacity to sign for the person	n identified on line 1 of this fo	rm. วันเดือนปี ที่ลงเ	นาม <b>กรอก เดือน - วัน - ปี</b>		
	_	ลงนาม (เซ็นให้เหมือนกับในเล Signature of beneficial owner (or individual auth	ย่าง 01/13/2025				
		wner) Date	(MM-DD-YYYY)				
	PIII	nt name of signer					

### ตัวอย่างการกรอก W8-BEN

### Form W-8BEN

(Rev. October 2021)

Department of the Treasury Internal Revenue Service

### Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E.

- Go to www.irs.gov/FormW8BEN for instructions and the latest information.
  - Give this form to the withholding agent or paver. Do not send to the IRS.

OMB No. 1545-1621

Give this form to the withholding agent or payer. Do not send to the IHS.										
Do NO	OT use this fo	rm if:				Instead, use Form:				
<ul><li>You</li></ul>	are NOT an in	dividual				W-8BEN-E				
You are a U.S. citizen or other U.S. person, including a resident alien individual										
You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the United States (other than personal services)										
• You	are a benefici	al owner who is receiving compensation for person	al services performed in	the United Stat	tes	8233 or W-4				
You are a person acting as an intermediary										
Note: If you are resident in a FATCA partner jurisdiction (that is, a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be										
provided to your jurisdiction of residence.										
Part I Identification of Beneficial Owner (see instructions)										
1	Name of ind	ividual who is the beneficial owner								
					and					
3	Permanent r	residence address (street, apt. or suite no., or rural	route). Do not use a P.C	). box or in-car	re-of address.					
	-	, state or province. Include postal code where appr			Country					
		waek district Bangkae province Bangkok cour	ntry		Thailand					
4	Mailing addr	ress (if different from above)								
	City or town	, state or province. Include postal code where appr	ropriate.		Country					
5	U.S. taxpay	ayer identification number (SSN or ITIN), if required (see instructions)								
6a		identifying number (see instructions) 1103300111888	6b Check if FTIN not	legally required						
7	Reference n	umber(s) (see instructions)	8 Date of birth (MM 09	-DD-YYYY) (see	instructions)					
Par	Clair	m of Tax Treaty Benefits (for chapter 3	ourposes only) (see	instructions	)					
9	I certify that	the beneficial owner is a resident of	Thailand		within the me	aning of the income tax				
treaty between the United States and that country.										
10	Special rate	es and conditions (if applicable – see instructions):								
	of the treaty identified on line 9 above to claim a % rate of withholding on (specify type of income):									
	Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding:									
	Explain the	additional conditions in the Article and paragraph to	le belleticia owilei filee	is to be eligible	ior the rate of wi	initioung.				
Part	III Cert	ification								
Under p	enalties of perjury,	declare that I have examined the information on this form and to the b	best of my knowledge and belief i	t is true, correct, and	complete. I further cert	ify under penalties of perjury that				
		nat is the beneficial owner (or am authorized to sign for the his form to document myself for chapter 4 purposes;	individual that is the benefit	cial owner) of all t	he income or proce	eds to which this form				
• The	person named o	in line 1 of this form is not a U.S. person;								
	form relates to:									
(a) income not effectively connected with the conduct of a trade or business in the United States;										
(b) income effectively connected with the conduct of a trade or business in the 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 income; or										
<ul> <li>(d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);</li> <li>The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and</li> </ul>										
		ons or barter exchanges, the beneficial owner is an exempt				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		his form to be provided to any withholding agent that has control, its of the income of which I am the beneficial owner. I agree that								
I certify that I have the capacity to sign for the person identified on line 1 of this form.  I certify that I have the capacity to sign for the person identified on line 1 of this form.										
Sign Here		Norawich 09-				-03-2024				
Signature of beneficial owner (or individual authorized to sign for beneficial owner) Date (MM-D NORAWICH SAWASDEEJA (ຕັວພັນພ໌ໃหญ່)						MM-DD-YYYY)				
	Print name of signer									