

Vous devrez compléter et nous retourner ce formulaire si vous souhaitez investir sur des actions listées aux États-Unis depuis votre compte titres. Veuillez noter :

- Votre formulaire W-8BEN est valide l'année de sa signature et pour les trois années calendaires suivantes. Nous vous contacterons lorsque vous devrez le renouveler
- Vous pouvez le remplir sur votre ordinateur ou à la main en utilisant une encre bleue ou noire. Pensez à signer votre formulaire et à nous le retourner par courrier postal ou par email à l'une des adresses ci-dessous
- Si vous commettez une erreur, veuillez la corriger de manière à ce que le formulaire reste lisible ou utiliser un nouveau formulaire
- Veuillez vous assurer que le formulaire est imprimé individuellement, sur papier blanc. Les formulaires ayant quoi que ce soit imprimé au dos, incluant cette page, ne seront pas acceptés.

Veuillez nous faire parvenir votre formulaire W-8BEN par email à l'adresse info.lu@ig.com ou par courrier à :

IG - Service Ouverture de compte

15 rue du Fort Bourbon
L1249 Luxembourg

1. Votre nom complet, identique à celui de votre compte

3. Votre adresse de résidence. Ne pas utiliser de boîte postale ni d'adresse de société, ne pas préciser "Chez M/ Mme X" et ne pas utiliser d'abréviation pour le pays

4. Ce champ peut rester vierge s'il s'agit de la même adresse que votre adresse de résidence

5. Ce champ peut rester vierge si vous n'avez pas de numéro TIN (Taxpayer Identification Number)

7. Renseignez le numéro de votre compte IG. Vous pourrez le retrouver dans la section 'Mon Compte' de notre plateforme

Signez le formulaire - nous n'acceptons pas les signatures électroniques ou les formulaires non signés

Apposez votre nom complet

2. Votre pays de résidence. Ne pas utiliser d'abréviation. Par exemple, ne pas écrire "USA" mais "United States of America"

6. Optionnel. Si vous connaissez le numéro d'identification fiscal de votre pays de résidence, vous pouvez le noter. Si non, ce champ peut rester vierge

8. Optionnel. Si vous renseignez votre date de naissance, veuillez utiliser le format américain (MM-JJ-AAAA)

9. Renseignez votre pays de résidence en entier. Ne pas utiliser d'abréviation. Par exemple, ne pas écrire "USA" mais "United States of America"

Renseignez la date au format américain (MM-JJ-AAAA)

Form **W-8BEN** **Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)** OMB No. 1545-1621
(Rev. February 2014) Department of the Treasury Internal Revenue Service

Do NOT use this form if:

- You are NOT an individual
- 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 U.S. (other than personal services)
- You are a beneficial owner who is receiving compensation for personal services performed in the United States
- A person acting as an intermediary

Instead, use Form:

- W-8BEN-E
- W-9
- W-8ECI
- 8233 or W-4
- W-8IMY

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner: Mr. Joe Bloggs

2 Country of citizenship: United Kingdom

3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.
123 Fake Street
City or town, state or province. Include postal code where appropriate. Example City, AB12 3CD Country: United Kingdom

4 Mailing address (if different from above)
City or town, state or province. Include postal code where appropriate. Country

5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)

6 Foreign tax identifying number (see instructions)

7 Reference number(s) (see instructions): Account number: 1234567

8 Date of birth (MM-DD-YYYY) (see instructions): 12/25/1980

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of United Kingdom within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the reasons the beneficial owner meets the terms of the treaty article: _____

Part III Certification

Under penalties of perjury, I declare 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 certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner or account holder of a foreign financial institution,
- The person named on line 1 of this form is not a U.S. person,
- The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income.
- 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
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.

Sign Here JBloggs Date (MM-DD-YYYY) _____

Print name of signer: Mr. Joe Bloggs Capacity in which acting (if form is not signed by beneficial owner)

For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 25047Z Form **W-8BEN** (Rev. 2-2014)

Une fois toutes ces informations renseignées, veuillez :

- Imprimer le formulaire en vous assurant que rien n'est imprimé au dos
- Si vous constatez une erreur, la corriger de manière lisible
- Signer le formulaire, le dater et nous le faire parvenir par email ou voie postale aux adresses ci-dessus



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

(Rev. February 2014)

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

OMB No. 1545-1621

Department of the Treasury
Internal Revenue Service

► Information about Form W-8BEN and its separate instructions is at www.irs.gov/formw8ben.
► Give this form to the withholding agent or payer. Do not send to the IRS.

Do NOT use this form if:

Instead, use Form:

- You are NOT an individual W-8BEN-E
- You are a U.S. citizen or other U.S. person, including a resident alien individual W-9
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services) W-8ECI
- You are a beneficial owner who is receiving compensation for personal services performed in the United States 8233 or W-4
- A person acting as an intermediary W-8IMY

Part I Identification of Beneficial Owner (see instructions)

| | | | |
|--|--|---|--|
| 1 Name of individual who is the beneficial owner | | 2 Country of citizenship | |
| 3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address. | | | |
| City or town, state or province. Include postal code where appropriate. | | Country | |
| 4 Mailing address (if different from above) | | | |
| City or town, state or province. Include postal code where appropriate. | | Country | |
| 5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions) | | 6 Foreign tax identifying number (see instructions) | |
| 7 Reference number(s) (see instructions) | | 8 Date of birth (MM-DD-YYYY) (see instructions) | |

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 **Special rates and conditions** (if applicable—see instructions): The beneficial owner is claiming the provisions of Article _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the reasons the beneficial owner meets the terms of the treaty article: _____

Part III Certification

Under penalties of perjury, I declare 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 certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner or account holder of a foreign financial institution,
- The person named on line 1 of this form is not a U.S. person,
- The income to which this form relates is:
 - (a) not effectively connected with the conduct of a trade or business in the United States,
 - (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
 - (c) the partner's share of a partnership's effectively connected income,
- 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
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here



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

Date (MM-DD-YYYY)

Print name of signer

Capacity in which acting (if form is not signed by beneficial owner)