



第一理財專用:

Account Number: _____

Brokerage Account Application 經紀帳戶申請表

請用正體英文填寫此表格. 所有資料必須填寫齊全方可進行開戶程序

Name of Account 帳戶名稱		E-mail Address 電子郵件信箱: _____	
Name on Account 帳戶註冊姓名		<input type="checkbox"/> Home 住家 <input type="checkbox"/> Business 公司 <input type="checkbox"/> P.O. Box 郵政信箱 Send mail to 信件寄至: _____ ()	
Joint Applicant's Name 共同持有申請人姓名	P.O. Box 郵政信箱 (如適用)	Home Telephone 住家電話	
Home Address 住址 (不可僅填寫郵政信箱)	City 城市	State 州	Zip Code 郵遞區號 Country 國家

Type of Account 帳戶類型

Account Registration 帳戶登記:

Individual 個人(以您的名字註冊) Joint Tenants with Rights of Survivorship 享有繼承權的共同持有
 Tenants in Common 共同持有 (請加填共同帳戶合約) Custodial 監護人 (提供未成年人的生日及社會安全號碼)

All qualified accounts are opened as margin accounts, allowing you to borrow against the value of certain marginable securities. To decline margin privileges, check the box below. \$2,000 minimum equity is required to establish a margin account.
 所有合格的帳戶申請表都將建立為融資帳戶, 讓您用帳戶內合格證券作為抵押融資。若您不希望融資, 請勾選以下方格。融資帳戶基本存款為\$2,000 股票或資金。

I decline margin privileges. Open my account as cash only. 我不希望融資, 請建立現金帳戶。

Personal Information 個人資料

Your Social Security or Tax ID Number 您的社會安全號碼或稅號	Date of Birth 生日	<input type="checkbox"/> Single 單身 <input type="checkbox"/> Divorced 離婚 <input type="checkbox"/> Married 已婚 <input type="checkbox"/> Widowed 喪偶 Marital Status 婚姻狀況
Bank Reference 銀行資料	Bank Account Number 銀行帳戶號碼	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Brokerage Account Reference 其他經紀帳戶資料	Are you a U.S. citizen? If not, please specify 您是不是美國公民? 若不是請註明國籍	<input type="checkbox"/> Single 單身 <input type="checkbox"/> Divorced 離婚 <input type="checkbox"/> Married 已婚 <input type="checkbox"/> Widowed 喪偶
Joint Applicant's Social Security or Tax ID Number 共同持有人社會安全號碼或稅號	Date of Birth 生日	Marital Status 婚姻狀況
Bank Reference 銀行資料	Bank Account Number 銀行帳戶號碼	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Brokerage Account Reference 其他經紀帳戶資料	Are you a U.S. citizen? If not, please specify 您是不是美國公民? 若不是請註明國籍	

Employment Information 工作資料

Your Employer 僱主	Occupation/Position 職位	Years of Employment 工作年資	Type of Business 公司類型 ()		
Business Address 公司地址	City 城市	State 州	Zip 郵遞區號	Country 國家	Business Telephone 公司電話
Joint Applicant's Employer 共同申請人僱主	Occupation/Position 職位	Years of Employment 工作年資	Type of Business 公司類型 ()		
Business Address 公司地址	City 城市	State 州	Zip 郵遞區號	Country 國家	Business Telephone 公司電話

Check here if you have granted trading authorization to another party. 如果您有授權第三方交易權力請勾選此方格。
If so, request Trading Authorization Form and provide name of agent 若是，請填寫第三方姓名資料：

Check here if you, or the Joint Applicant, are a director, 10% shareholder, or policy-making officer of a publicly traded company. 如果您或共同帳戶持有人為任何公開上市公司的董事，10% 持股人或決策人，請勾選此方格。
If so, identify the company name, address, and position held 若是，請填寫該公司名稱、地址、以及職位：

Check here if you, or the Joint Applicant, are licensed or employed by a registered broker/dealer or registered investment advisor. 如果您或共同帳戶持有人本人或僱主為登記有照的經紀或投資顧問，請勾選此方格。
If so, identify the company name, address, and position held 若是，請註明公司名稱、地址、以及職位：

Check here if you, the Joint Applicant, or any member of your immediate family, is a Senior Foreign Political Figure. 如果您、共同帳戶持有人或您的直系親屬是國外高級政府官員，請勾選此方格。
If so, identify the name of the official, office held, relationship to account owner, and country 若是，請註明官員姓名、職位、國家、以及與您的關係：

Investment Profile 投資資料

Regulations require us to ask for the following information in order to properly service your investment needs. For joint accounts, please provide us with information for your household. All information will be kept strictly confidential. 相關單位規定我們取得以下資料，以便提供更完善的投資服務。共同持有帳戶請用家庭為單位填寫。所有資料將慎重保密。

Investment Objectives 投資目標 (可複選)：

- Speculation/Trading 投機/交易 Growth 增值 Income 收入 Capital Preservation 資金保值

Your investment objectives must include Speculation/Trading for option trading 期權交易必須勾選投機/交易

Investing Experience 投資經驗：

- None 無
 Limited 有限
 Good 良好
 Extensive 豐富

Annual Income 年收入(所有來源)：

- \$0 - \$24,999
 \$25,000 - \$49,999
 \$50,000 - \$74,999
 \$75,000 - \$99,999
 Over \$100,000

Federal Tax Bracket 聯邦課稅級別：

- Under 15%
 15% - 25%
 Over 25%

Estimated Net Worth 淨資產估計：

- \$0 - \$49,999
 \$50,000 - \$99,999
 \$100,000 - \$249,999
 \$250,000 - \$499,999
 Over \$500,000

Estimated Liquid Net Worth 流動資產估計(現金及流動證券)：

- \$0 - \$49,999
 \$50,000 - \$99,999
 \$100,000 - \$249,999
 \$250,000 - \$499,999
 Over \$500,000

Would you like your existing brokerage account transferred to Firsttrade? 您是否想將您現有的經紀帳戶轉至第一理財？

Yes, transfer my existing brokerage account to Firsttrade. 是的，請將我現有的經紀帳戶轉至第一理財。(相關表格會郵寄給您，或您可以至第一理財網站 www.firsttrade.com/chinese 下載)

No, not at this time. 否。

Account Agreement 帳戶合約

Rule 14b-1(c) of the Securities Exchange Act, unless you object, requires us to disclose to an issuer, upon its request, the name, address, and securities position of our customers who are beneficial owners of the issuer's securities, which are held by Ridge Clearing in nominee name. The issuer would be permitted to use your name and other related information for corporate communication only. If you object to this disclosure, check this box:

I would like to establish a brokerage account with Firstrade Securities Inc. which clears all transactions through Ridge Clearing. I acknowledge by signing this agreement that I have received, read and understand the terms and conditions in the Firstrade Securities Inc. Account Agreement (which includes the margin agreement), and agree to be bound by these terms and conditions as they apply to my account as amended from time to time. I agree that Firstrade Securities Inc. does not provide legal or tax advice, and will not advise me concerning the nature, potential value, or suitability of any particular security, transaction, or investment strategy. I understand that investments purchased through Firstrade Securities are not insured by the FDIC (Federal Deposit Insurance Corporation), are not obligations of or guaranteed by any financial institution and are subject to investment risk and loss that may exceed the principal invested.

In accordance with the Firstrade Securities Account Agreement, I agree that all debts and other obligations owed to Firstrade and any party to the Account Agreement will be secured by a lien on all securities and other property now or hereafter held or maintained in any of my present or future Firstrade accounts, whether individually or jointly held with others, or in any other Firstrade account in which I have an interest.

I further acknowledge that I have received, read and understand the predispute arbitration clause located in the Firstrade Securities Inc. Account Agreement, paragraph 23, and agree to resolve any disputes arising out of my account by arbitration.

I further acknowledge that I have received, read and understand the Margin Disclosure Statement provided by Firstrade Securities Inc.

Under penalties of perjury, I certify (1) that the number shown on this application is my correct taxpayer identification number and (2) that I am not subject to backup withholding and (3) that I am a U.S. person (including a resident alien); provided, however, if I am a nonresident alien as disclosed in this application, I do not certify that I am a U.S. person and I understand that I must submit the appropriate W-8 Form. If I have been notified by the IRS that I am subject to backup withholding as a result of dividend or interest underreporting, I must cross out the text contained in clause (2) of this section and I understand I will be subject to backup withholding.

I authorize Ridge Clearing and/or Firstrade Securities to obtain a consumer report at the time of application to verify my creditworthiness and to obtain a consumer report from time to time for updates, renewals, extensions, and collection activity on any approved account. Upon my written request, Ridge Clearing will disclose to me whether it obtained a report, and if so, the name and address of the consumer-reporting agency that provided it. In the event that my account is denied, as a result of the consumer report verification, I authorize Ridge Clearing to provide to Firstrade the reason(s) for such denial.

I acknowledge that the information provided in the Account Application is accurate and correct. 本人確認此帳戶申請表所填寫的資料準確無誤。

X

Applicant's Signature 申請人簽名

Date 日期

X

Joint Applicant's Signature 共同申請人簽名

Date 日期

第一理財專用

Margin

Cash

Approved By: _____

Date: _____

Account #: _____

Customer ID
Verified: _____

Yes

No

BAA-TW-0820

W-8BEN 表格填寫說明

美國證券市場幾乎對全世界國家的人民開放，為獎勵投資，符合外國人身份的投資人買賣證券所得之資本利得(Capital Gain)免予扣繳美國所得稅。若您並非美國居民，開戶時請填寫美國國稅局提供的 W-8BEN 表，以便享受免稅優惠。然而，外國投資人所得的現金股利 (Dividends) 仍然必須繳交美國政府所得稅。W8BEN 表請寄到第一理財而非美國國稅局。

W-8BEN 是美國政府單位發行的表格，必須以英文正楷填寫，第一理財所提供的中文版本，僅作參考用。

請注意：

- 美國公民、持有綠卡之永久居民請勿使用 W-8BEN，請使用 W-9。
- 居住在美國境內之外籍人士，其身份符合美國國稅局所定義之所得稅申報義務人者，請勿使用 W-8BEN，請使用 W-9。
- 當年度在美國境內實際居住超過 183 天之外籍人士，請勿使用 W-8BEN。F、J、M、Q 簽證持有者除外，請在表格上註明您的簽證類別。
- 若您的身分由他國國籍變更為美國公民或永久居民，請於 30 天內填寫 W-9 通知第一理財。
- 若您的固定居住地址遷移至不同國家，請於 30 天內填寫新的 W-8BEN 表格交予第一理財。

Part I 受益人資料

1. 姓名
2. (個人不須填寫；公司組織請填寫成立所在地國名)
3. 受益人所屬類別
4. 固定居住地址 (恕不接受郵政信箱號碼或代收郵件地址)
除少數例外，居住地址應包含門牌號碼、路(街)名、城市名、國名和郵政編碼。
5. 通訊地址 (若與固定居住地址相同可不填)
6. 美國納稅人稅籍號碼 (例如社會安全號碼 SSN 或個人報稅號碼 ITIN)
7. 國外稅籍號碼 (如適用)
8. 相關號碼 (如第一理財帳戶號碼)

Part II 稅務減免要求 (如適用)

9. 若以下適用請勾選
 - a: 所得期間若申報人居住在美國的稅務減免互惠國內，請勾選此方塊並填寫該國家名稱。

Part III 填寫人聲明

本人聲明以上所填資料屬實且完整。同時也聲明以下項目為實：

- 本人 (或授權人) 為本表格所提及的所有所得申報人。
- 受益人不是美國稅法規定的美國所得稅申報義務人 (U.S. Person)。
- 本人的所得不屬美國的貿易或商業行為，且本人確實符合美國的稅務減免互惠資格。
- 證券交易受益人是免徵美國所得稅的他國申報人。

除此之外，在此聲明，美國所得稅扣繳單位有權預扣我的稅款。

SIGN HERE 簽名欄

請受益人或授權人簽名；日期 (月/日/年)；授權代理人身分。



Substitute Form W-8BEN

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding

Department of the Treasury Internal Revenue Service

- Section references are to the Internal Revenue Code.
- For complete instructions or more information on the W-8 forms, please refer to the Internal Revenue Service (IRS) website at www.irs.gov.
- Give this form to the withholding agent or payer. Do not send to the IRS.

Do not use this form for:

Instead, use Form:

- A U.S. citizen or other U.S. person, including a resident alien individual.....W-9
 - A person claiming an exemption from U.S. withholding on income effectively connected with the conduct of a trade or business in the United States.....W-8ECI
 - A U.S. nonresident alien physically present in the U.S. for 183 days or more during the present calendar year.
- Exception:** Individuals holding an "F", "J", "M" or "Q" visa should use this form. If yes, please indicate visa type here: _____.
- Note:** See IRS instructions for additional exceptions.

Part I Identification of Beneficial Owner (See Instructions.)

1 Name of individual that is the beneficial owner	2 Country of incorporation or organization <p style="text-align: center;">N / A</p>
3 Type of beneficial owner: <input type="checkbox"/> Individual	
4 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 (do not abbreviate)
5 Mailing address (if different from above)	
City or town, state or province. Include postal code where appropriate.	Country (do not abbreviate)
6 U.S. taxpayer identification number, if required (see instructions)	7 Foreign tax identifying number, if any (optional)
8 Reference number(s) (see instructions)	

Part II Claim of Tax Treaty Benefits (if applicable)

- 9 I certify that (check all that apply):
- a. The beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.
 - b. If required, the U.S. taxpayer identification number is stated on line 6 (see instructions).
 - c. The beneficial owner is related to the person obligated to pay the income within the meaning of section 267(b) or 707(b), and will file Form 8833 if the amount subject to withholding received during a calendar year exceeds, in the aggregate, \$500,000.

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 beneficial owner (or am authorized to sign for the beneficial owner) of all the income to which this form relates,
 - The beneficial owner is not a U.S. person,
 - The income to which this form relates is not effectively connected with the conduct of a trade or business in the United States or is effectively connected but is not subject to tax under an income tax treaty, **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 which I am the beneficial owner. The Internal Revenue Service does not require your consent to any provisions of this document other than the certifications required to establish your status as a non-U.S. person and, if applicable, obtain a reduced rate of withholding.

Sign Here

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

Date (MM-DD-YYYY)

Capacity in which acting