Form **8233**

(Rev. October 1996)

Exemption From Withholding on Compensation for Independent (and Certain Dependent) Personal Services of a Nonresident Alien Individual

OMB No. 1545-0795

Department of the Treasury

► See separate instructions.

Interna	The voluce Service	diate instructions.	
and e	exemption is applicable for compensation for calendar year 19 ending , 19		, 19,
Par	t I Nonresident Alien Individual Identification (See Specific Instructions)	
Name		Taxpayer identification number	
U.S. address (number and street) (Include apt. or suite no. or P.O. box)		United States visa type and number	
City, s	state, and ZIP code		
Citize	ns of Canada or Mexico complete either lines 1a and 1b or line 2 below;	all other filers complete lines 1a, 1b, and 2.	
	Country issuing passport	2 Permanent foreign address	
3	Compensation is for services performed by me as a: Self-employed person (independent personal services) Foreign researcher Business/vocational trainee		
	tion: If you are a foreign student, foreign professor/teachd tional statement you must attach.	er, or foreign researcher, see the line 3	instructions for the required
4 a b	Compensation for independent (and certain dependent) personal services: Description of personal services you are providing		
5 a b	If compensation is exempt from withholding because of a U.S. tax treaty, provide: Tax treaty and treaty article under which you are claiming exemption from withholding Total compensation listed in 4b above that is exempt from tax under this treaty \$		
6	Additional facts to justify the exemption from withholding.		
7	Number of personal exemptions claimed ▶	8 How many days will you perform so the United States during this tax ye	
	penalties of perjury, I declare that I have examined this form and any act, and complete. I also declare, under penalties of perjury, that I am not a		nowledge and belief, they are true,
Sign	ature of nonresident alien individual ►		Date ►
Par	t Withholding Agent Certification		
Name			Employer identification number
Addre	ess (number and street) (Include apt. or suite no. or P.O. box, if applicable).)	
City, state, and ZIP code			Telephone number
and th	penalties of perjury, I certify that I have examined this form and any accomnat I do not know or have reason to know that the nonresident alien individus compensation for the exemption cannot be readily determined.		
Signature of withholding agent ►			Date ►