UW Home > Discover UW > Admin Gateway > Payroll > NRA

Separtment of the Treasury Internal Revenue Service		a Nonresident A ► See separate instruction		
Who Should Use This Form?	IF you are a nonresident ali receiving	•	THEN, if you are the benefi income, use this form to cla	
Note: For definitions of terms used in this section and detailed	Compensation for independent personal services performed in the United States all of that compensation and/ daily personal exemption and		d/or to claim the	
and detailed instructions on required withholding forms	Compensation for dependent personal services performed in the United States A tax treaty withholding exemption all of that compensation. Note: Do not use Form 8233 to compensation personal exemption amount. Note: Do not use Form 8233 to compensation.			emption for part or
for each type of income, see				
Definitions on pages 1 through 3 of the instructions.	Noncompensatory scholars income and personal servic the same withholding age	es income from	A tax treaty withholding exemption for part or all of both types of income.	
DO NOT Use This Form	IF you are a beneficial own	erwhois	INSTEAD, use	
	personal services performe States and you are not clai	Receiving compensation for dependent Form W-4 versonal services performed in the United States and you are not claiming a tax treaty vithholding exemption for that compensation		
	Receiving noncompensatory fellowship income and you any personal services incom withholding agent	are not receiving	Form W-8BEN or, if elected by the withholding agent, Form W-4 for the noncompensatory scholarship or fellowship income	
	Claiming only foreign status with respect to income that compensation for personal	is not	Form W-8BEN	
and ending	tion of Beneficial Owner (S		or other tax year beginning	
4 Permanent residence	address (street, apt. or suite no., or run		3 ox.	
City or town, state or	province. Include postal code where a	ppropriate.	Country (do not abbreviate)	
	States (street, apt. or suite no., or rura	il route). Do not use a P.O. bo		
City or town, state, an	d ZIP code			
Note: Citizens of 6 U.S. visa type	Canada or Mexico are not req 7a	uired to complete lines	7a and 7b. 7b Passport number	
6 8 Date of entry into the	Te United States		7b s 9b Date your current nonin	unicent status ounires
8	9		9 b [°]	
	in student, trainee, professor/t line 10 instructions for the r			10 🕨 🗆

			and/or Personal Exemption Am	oun
11 a	Compensation for independent (and cer Description of personal services you are			
_		,,		
	N - 1			
12	Total compensation you expect to be pa If compensation is exempt from withhole			
	Tax treaty and treaty article on which y	~		
b c	Total compensation listed on line 11b at Country of permanent residence		npt from tax under this treaty \$ 12	D
	Note: Do not complete lines 13a throug withholding agent.	h 13c unless you	also received compensation for perso	nal services from the san
13	Noncompensatory scholarship or fellow:	ship income:		
	Amount \$ 13a			
ь	Tax treaty and treaty article on which y	ou are basing ex	cemption from withholding (130)	
с	Total income listed on line 13a above th	at is exempt from	m tax under this treaty \$ 13c	
14	Sufficient facts to justify the exemption	from withholding	claimed on line 12 and/or line 13 (see	instructions)
	14			
	Note: Lines 15 through 18 are to be con	mpleted only for		
15	claimed ►		16 How many days will you perform s the United States during this tax you	
17	Daily personal exemption amount claims	ed (see instructio		
18	Total personal exemption amount claime			
Pa	rt III Certification			
	r penalties of perjury, I declare that I have examined ter certify under penalties of perjury that:	the information on the	is form and to the best of my knowledge and beli	of it is true, correct, and complete
	m the beneficial owner (or am authorized to sign for t	the beneficial owner!	of all the income to which this form relates.	
	e beneficial owner is not a U.S. person.			
	e beneficial owner is a resident of the treaty country if that country.	listed on line 12a and	/or 13b above within the meaning of the income t	tax treaty between the United Sta
	e beneficial owner is not a former citizen or long-tem section 877, the beneficial owner is nevertheless enti			n acts of expatriation) or, if subject
	ermore, I authorize this form to be provided to any w withholding agent that can disburse or make payment			which I am the beneficial owner o
Sig	n Here	19 r (or individual author	ized to sign for beneficial owner)	19 Date
	rt IV Withholding Agent Accepta		· · ·	
Pa	,			Employer identification numb
Pa Name	ess (number and street) (include apt, or suite no. or P	P.O. box, if applicable	0	
Name				Telephone number
Name Acidin	state, and ZIP code			I motion from withholding is warran
Addn City, Unde	state, and ZIP code r penalties of perjury. I certify that I have examined this hat I do not know or have reason to know that the pilon cannot be readily determined.			
Addn City, Unde and t exem	r penalties of perjury, I certify that I have examined this tat I do not know or have reason to know that the			

• IRS Form 8233 (printable .pdf file)

А.

B. Enter the appropriate **calendar year**. This form needs to be completed each calendar year if you wish to claim an exemption.

1. Enter your name (last name first, exactly shown on your social security card).

2. Enter your U.S. social security number.

3. Enter your foreign tax identifying number, if any (optional). For example, i fyou are a resident of Canada, enter your Social Insurance Number.

4. Enter your permanent foreign address in your country of legal residence (street, apt. or suite no., or rural route). Do not use a P.O. Box.

4a. Enter city or town, province (state) and include postal code.

4b. Enter the name of country (do not abbreviate).

5. Enter the address while living in the U.S. (street, apt. or suite no., or rural route). Do not use a P.O. Box.

5a. Enter city or town, state and zip code.

6. Enter your U.S. visa type (found on your Form I-94). For example, foreign students are usually granted an "F-1" visa. Foreign professors, teachers, or researchers are usually granted a "J-1" visa.

Note: Citizens of Canada or Mexico are not required to complete lines 7a and 7b.

7a. Enter the country that issued your passport.

7b. Enter your passport number.

8. Enter your date of original entry into the United States that pertains to your current nonimmigrant status.

9a. Enter your current nonimmigrant status. For example, enter student, trainee, professor/teacher, or researcher.

9b. Enter the date your current nonimmigrant status expires which is shown on your current INS Form I-94.

10. Check this box if you are a foreign student, trainee, professor/teacher, or researcher.

11a. Describe briefly the services for which you are being compensated.

Examples: research assistant, working in the library, or course instructor.

11b. Enter your anticipated compensation from the UW for the current calendar year.

12a. Enter the tax treaty and article number you are claiming.

Example: U.S./France tax treaty, Article 21

- List of student tax treaties
- List of teacher/reseacher tax treaties

12b. Enter the amount of compensation that is exempt from tax under your tax treaty article claimed. For example, the U.S./Korean tax treaty exempts \$2000 of wages of students, so \$2000 would be entered on line 12b.

12c. Enter your country or permanent residence.

13a. Leave blank.

13b. Leave blank.

- 13c. Leave blank.
- 14. Leave blank.
- 15. Leave blank.
- 16. Leave blank.
- 17. Leave blank.
- 18. Leave blank.
- 19. Sign and date the form.
- B. Attach and complete the appropriate statement for the treaty provision you are claiming.
 - Return the form to Payroll, Box 355655.
 - For more information, see <u>IRS Instructions.</u>
 - Do not claim "exempt" on Form W-4. <u>See Form W-4 instructions for nonresident aliens</u> for more information.



Payroll Box 355655 A Division of Financial Management payroll@u.washington.edu Modified: January 10, 2005 University of Washington 3903 Brooklyn Ave. NE Seattle, WA 98105

> Office (206)543-9202 Fax (206)543-8137 Box 355655 Hours: 8am - 5pm

Form 8233 (Rev. March 2009)	Exemption From Withholding of for Independent (and Certain De Services of a Nonresident A	pendent) Personal	OMB No. 1545-0795
Department of the Treasury Internal Revenue Service	See separate instruction	ns.	
Who Should Use This Form?	IF you are a nonresident alien individual who is receiving	THEN, if you are the benefin income, use this form to cla	
Note: For definitions of terms used in this section and detailed instructions on modulized	Compensation for independent personal services performed in the United States	A tax treaty withholding exe (Independent personal serv profits) for part or all of tha and/or to claim the daily pe amount.	ces, Business t compensation
required withholding forms for each type of income, see Definitions on pages 1 and 2 of	Compensation for dependent personal services performed in the United States	A tax treaty withholding exe all of that compensation. Note: <i>Do not</i> use Form 823 personal exemption amount	33 to claim the daily
the instructions.	Noncompensatory scholarship or fellowship income and personal services income from the same withholding agent	A tax treaty withholding exe all of both types of income	
DO NOT Use	IF you are a beneficial owner who is	INSTEAD, use	
This Form	Receiving compensation for dependent personal services performed in the United States and you are not claiming a tax treaty withholding exemption for that compensation	Form W-4 (See page 2 of the for Form 8233 for how to c W-4.)	
	Receiving noncompensatory scholarship or fellowship income and you are not receiving any personal services income from the same withholding agent	Form W-8BEN or, if elected withholding agent, Form W noncompensatory scholars fellowship income	-4 for the
	Claiming only foreign status or treaty benefits with respect to income that is not compensation for personal services	Form W-8BEN	

This exemption is applicable for compensation for calendar year, or other tax year beginning and ending

Part I Identificatio	on of Beneficial O	wner (See instructions.)	
1 Name of individual who is	s the beneficial owner	2 U.S. taxpayer identifying number	3 Foreign tax identifying number, if any (optional)
4 Permanent residence add	dress (street, apt. or su	ite no., or rural route). Do not use a P.	O. box.
City or town, state or pro	wince. Include postal c	ode where appropriate.	Country (do not abbreviate)
5 Address in the United Sta	ates (street, apt. or sui	te no., or rural route). Do not use a P.C). box.
City or town, state, and 2	ZIP code		
Note: Citizens of Cana	da or Mexico are no	ot required to complete lines 7a and	1 7b.
6 U.S. visa type		7a Country issuing passport	7b Passport number
8 Date of entry into the Un	ited States	9a Current nonimmigrant status	9b Date your current nonimmigrant status expires
, ,		eacher, or researcher, check this box equired additional statement you must a	
		otice, see separate instructions.	Cat. No. 62292K Form 8233 (Rev. 3-2009

Form	8233 (Rev. 3-2009)	Page 2
Pa	rt II Claim for Tax Treaty Withholding Exemption and/or Personal Exemption Ar	nount
11	Compensation for independent (and certain dependent) personal services:	
а	Description of personal services you are providing	
h		
12	Total compensation you expect to be paid for these services in this calendar or tax year \$. If compensation is exempt from withholding based on a tax treaty benefit, provide:	
	Tax treaty and treaty article on which you are basing exemption from withholding	
	Total compensation listed on line 11b above that is exempt from tax under this treaty \$	
C	Country of permanent residence	
	Note: Do not complete lines 13a through 13c unless you also received compensation for perso withholding agent.	onal services from the same
	Noncompensatory scholarship or fellowship income:	
	Amount \$	
D	Tax treaty and treaty article on which you are basing exemption from withholding	
с	Total income listed on line 13a above that is exempt from tax under this treaty \$	
14	Sufficient facts to justify the exemption from withholding claimed on line 12 and/or line 13 (se	e instructions)
	Note: Lines 15 through 18 are to be completed only for certain independent personal services	(coo instructions)
15	Number of personal exemptions 16 How many days will you perform	
15	claimed ► the United States during this tax	
17	Daily personal exemption amount claimed (see instructions) ►	
18	Total personal exemption amount claimed. Multiply line 16 by line 17	
Pa	rt III Certification	
	er penalties of perjury, I declare that I have examined the information on this form and to the best of my kn ect, and complete. I further certify under penalties of perjury that:	owledge and belief it is true,
	m the beneficial owner (or am authorized to sign for the beneficial owner) of all the income to which this for	rm relates.
	e beneficial owner is not a U.S. person.	
	e beneficial owner is a resident of the treaty country listed on line 12a and/or 13b above within the meaning given the United States and that country.	g of the income tax treaty
	nermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody ficial owner or any withholding agent that can disburse or make payments of the income of which I am the	
Sia	n Here	
	Signature of beneficial owner (or individual authorized to sign for beneficial owner)	Date
	rt IV Withholding Agent Acceptance and 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

Under penalties of perjury, I certify that I have examined this form and any accompanying statements, that I am satisfied that an exemption from withholding is warranted, and that I do not know or have reason to know that the nonresident alien individual is not entitled to the exemption or that the nonresident alien's eligibility for the exemption cannot be readily determined.

Signature of withholding agent	t 🕨	aden	oldina	withho	of	Signature
--------------------------------	-----	------	--------	--------	----	-----------