TAX TREATY STATEMENT--STUDENT EMPLOYEE

FRANCE Article 21

- 1. I was a resident of France on the date of my arrival in the United States. I am not a United States citizen. I have not been lawfully accorded the privilege of residing permanently in the United States as an immigrant.
- 2. I am temporarily present in the United States for the primary purpose of studying at the University of California, _____.
- 3. I will receive compensation for personal services performed in the United States. This compensation qualifies for exemption from withholding of federal income tax under the tax treaty between the United States and ____ in an amount not in excess of \$5000 for any taxable year. I have not previously claimed an income tax exemption under this treaty for income received as a teacher, researcher, or student before the date of my arrival in the United States.
- 4. I will be present in the United States only for such period of time as may be reasonably or customarily required to effectuate the purpose of this visit.
- (the date of your last arrival 5. I arrived in the United States on _____ into the United States before beginning the study at the University of California,). The treaty exemption is available only for compensation paid during a period of five taxable years.

Under penalties of perjury, I declare that this statement, to the best of my knowledge and belief, is true, correct, and complete.

Signature of Nonresident Alien Employee: _____

Print Name: _____ Date: _____

****YOU MUST COMPLETE NEW FORMS FOR EACH CALENDAR YEAR****

WITHHOLDING AGENT CERTIFICATION

Name	Employer identification number
Address (number and street)	
City, state, and Zip code	Telephone number ()
	xamined this form and any accompanying statements, olding is warranted, and that I do not know or have

reason to know that the nonresident alien individual's compensation is not entitled to the exemption or that the eligibility of the nonresident alien's compensation for the exemption for the exemption cannot be readily determined.

Signature of Withholding Agent :______Date:_____Date:_____