

**TAX TREATY STATEMENT--TEACHER OR RESEARCHER**

**United Kingdom  
(Article 20 A)**

1. I was a resident of the United Kingdom on the date of my arrival in the United States. I am not a United States citizen. I have not been accorded the privilege of residing permanently in the United States as an immigrant.
2. I am a professor or teacher visiting the United States for a period of not more than two years for the purpose of teaching or engaging in research at the University of California, \_\_\_\_\_ which is a recognized educational institution. I will receive compensation for my teaching or research activities.
3. The teaching or research compensation received during the entire taxable year (or during the period from \_\_\_\_\_ to \_\_\_\_\_) qualifies for exemption from withholding of federal tax under the tax treaty between the United States and the United Kingdom. I have not previously claimed an income tax exemption under that treaty for income received as a teacher, researcher, or student before the date of my arrival in the United States.
4. Any research I perform will be undertaken in the public interest and not primarily for the benefit of any private person or persons.
5. I arrived in the United States on \_\_\_\_\_ (the date of your last arrival into the United States before beginning the teaching or research services for which exemption is claimed). The treaty exemption is available only for compensation received during a period of two years beginning on that date. The entire treaty exemption is lost RETROACTIVELY if my stay in the United States exceeds two 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  
| ( )

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

Signature of Withholding Agent: \_\_\_\_\_ Date: \_\_\_\_\_