Attachment to form 8233
Teachers/Researchers

(For use by teachers/researchers from the Commonwealth of Independent States who are claiming Tax Treaty exemption.)

1. I am a resident of a country that is a member of the Commonwealth of Independent 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 have accepted an invitation by a governmental agency or institution in the United States, or by an educational or scientific research institution in the United States, to come to the United States for the purpose of teaching, engaging in research, or participating in scientific, technical, or professional conferences at The University of Michigan, which is a governmental agency or institution, an educational, or scientific institution, or an organization sponsoring a professional conference. I will receive compensation for my teaching, research or conference activities.

3. The teaching, research, or conference compensation received during the entire tax year (or for the period from ________________ to _______________) qualifies for exemption from withholding of federal tax under the tax treaty between the United States and the Commonwealth of Independent States. I have not previously claimed an income tax exemption under that treaty for income received as a teacher, researcher, conference participant, or student before the date of my arrival in the United States.

4. Any research I perform will not be undertaken primarily for the benefit of a private person or commercial enterprise of the United States or a foreign trade organization of the Commonwealth of Independent States, unless the research is conducted on the basis of intergovernmental agreements on cooperation.

5. I arrived in the United States on _________________. The treaty exemption is available only for compensation received during a period of two years beginning on that date.

Under penalties of perjury, I declare that the above statements are true, correct, and complete.

Name:___________________________ Signature:____________________________

Soc. Sec. #:_______________________ Date:________________________________

FORM 8233-P

12/21/06