



Tax Summary Report

Summary of Information Entered Into GLACIER™:		
Name:	Maxime Martin Arthur Cugnon de Sevracourt	2022 - 283 Days 2021 - 345 Days 2020 - 123 Days 2014 - 135 Days 2013 - 148 Days
SSN / ITIN:	761-85-1119	
Email Address:	mc2534@georgetown.edu	
Country of Tax Residence:	France	
Country of Citizenship:	France	
CURRENT Immigration Status:	F1 Student	
Original Immigration Status:		
Immigration Status Expiration:	May 22, 2027	Changed Immigration Status? No
Employee ID:	85643	Immigration Status Change Date:
Supplier ID:		Date of Entry to U.S.: August 31, 2020
GUID:	817321448	Estimated Date of Departure: May 22, 2027
Tax Determinations and Results Based on the data entered, GLACIER has made the following determinations:		
Tax Residency Status: Nonresident Alien for U.S. Tax Purposes		
Residency Status Change Date: July 3, 2023 to Resident Alien		
Residency Status Start Date: January 1, 2023 to Resident Alien		
Residency Status Change Date 2 (if applicable):		
Residency Status Start Date 2 (if applicable):		
Compensation/Wages		
Applicable Tax Withholding Rate: (If Tax Treaty Does Not Apply or Form Is Not Submitted)	Single (Bi-Weekly) Exempt	EX
Tax Treaty Exemption Status:	Five Calendar Years	
Tax Treaty Time Limit:	August 31, 2020 - December 31, 2024	
Tax Treaty Exemption Period:		
Tax Treaty Dollar Limit:	\$5,000 per calendar year	
Scholarship or Fellowship (Non-Service)		
Applicable Tax Withholding Rate: (If Tax Treaty Does Not Apply or Form Is Not Submitted)	14 Percent	EX
Tax Treaty Exemption Status:	Exempt	
Tax Treaty Time Limit:	Five Calendar Years	
Tax Treaty Exemption Period:	August 31, 2020 - December 31, 2024	
Tax Treaty Dollar Limit:	Unlimited Dollar Amount	
FICA Tax Status:	Taxable	FICA Tax Start Date: January 1, 2023
Required Forms and Document Copies Attach the following Forms and Documents to the Tax Summary Report		
<i>Please print, sign and submit with Tax Summary Report</i> Required Forms: Form W-4 Form W-8BEN Form W-9/Statement Form 8233 - 2023 Treaty Attachment		<i>Please copy and submit with Tax Summary Report</i> Required Document Copies: Form I-20 Form I-94/I-94W Card Visa Sticker/Stamp (in Passport)
Certification		
I hereby declare that the information provided by me to Georgetown University and/or entered into the GLACIER Online Tax Compliance System for purposes of making the tax determinations above is true and correct. If any of the information provided changes or if other relevant information becomes available, I will notify Georgetown University as soon as possible so that this information and/or my U.S. tax status may be updated.		
Signature:		Date:



Tax Summary Report Instructions

Congratulations – You Have Completed Your Individual Record in GLACIER!

You are almost finished . . .

- Review, sign and date each of the Required Forms (see list on previous page);
- Submit the Required Forms and a copy of each of the Required Documents (see list on previous page) following the instructions below.

Please submit all Required Forms and Document Copies to:

You will have received a notification from Box indicating that a secure document storage folder has been created for you. Please search for a recent message from "noreply@box.com" to locate the notification and access your folder. Please submit required documents via this Box folder.

GLACIER Administrator: Lawrence Smith
Senior Tax Accountant
NRATAX@Georgetown.edu
202-687-0175

All Required Forms and Document Copies must be submitted within 7 days; failure to submit all Required Forms and Document Copies on time may result in tax withheld from payments made to you.

If any information in your Individual Record changes, you must access GLACIER and update your Individual Record as soon as possible.

If you have any questions, please contact the GLACIER Administrator listed above.

Thank you for your prompt attention to this matter.

Additional Information, if any

Employee's Withholding Certificate

OMB No. 1545-0074

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**Give Form W-4 to your employer.****Your withholding is subject to review by the IRS.****2023****Step 1:
Enter
Personal
Information****(a)** First name and middle initial

Maxime M

Last name

Cugnon de Sevrécourt

(b) Social security number

761 85 1119

Address

2141 Wisconsin Avenue NW Apt 502

City or town, state, and ZIP code

Washington, DC 20007

Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.**(c)** ☒ **Single or Married filing separately**☐ **Married filing jointly or Qualifying surviving spouse**☐ **Head of household** (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)**Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, other details, and privacy.**Step 2:
Multiple Jobs
or Spouse
Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.**(a)** Reserved for future use.**(b)** Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below; **or****(c)** If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is generally more accurate than (b) if pay at the lower paying job is more than half of the pay at the higher paying job. Otherwise, (b) is more accurate ☐**TIP:** If you have self-employment income, see page 2.**Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)**Step 3:
Claim
Dependent
and Other
Credits**

If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly):

Multiply the number of qualifying children under age 17 by \$2,000 \$

Multiply the number of other dependents by \$500 \$

Add the amounts above for qualifying children and other dependents. You may add to this the amount of any other credits. Enter the total here

3 \$ 0.00**Step 4
(optional):
Other
Adjustments****(a) Other income (not from jobs).** If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income**4(a)** \$**(b) Deductions.** If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here**4(b)** \$**(c) Extra withholding.** Enter any additional tax you want withheld each **pay period** . .**4(c)** \$**NONRESIDENT ALIEN****Step 5:
Sign
Here**

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

Employee's signature (This form is not valid unless you sign it.)**Date****Employers
Only**

Employer's name and address

First date of
employmentEmployer identification
number (EIN)

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

- For use by individuals. Entities must use Form W-8BEN-E.
- Go to www.irs.gov/FormW8BEN for instructions and the latest information.
- Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NOT use this form if:

- You are NOT an individual W-8BEN-E
- You are a U.S. citizen or other U.S. person, including a resident alien individual W-9
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the United States (other than personal services) W-8ECI
- You are a beneficial owner who is receiving compensation for personal services performed in the United States 8233 or W-4
- You are a person acting as an intermediary W-8IMY

Instead, use Form:

Note: If you are resident in a FATCA partner jurisdiction (that is, a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner <u>Maxime Martin Arthur Cugnon de Sevicourt</u>	2 Country of citizenship <u>France</u>
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address. <u>12 rue Saint Michel</u> City or town, state or province. Include postal code where appropriate. <u>Caen, 14000</u>	
4 Mailing address (if different from above) <u>2141 Wisconsin Avenue NW Apt 502</u> City or town, state or province. Include postal code where appropriate. <u>Washington, DC 20007</u>	
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions) <u>761851119</u>	
6a Foreign tax identifying number (see instructions)	6b Check if FTIN not legally required <input type="checkbox"/>
7 Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY) (see instructions)

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of France within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph Article 21 of the treaty identified on line 9 above to claim a 0 % rate of withholding on (specify type of income):
Scholarship or Fellowship.

Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding:
I have met all of the requirements set forth in the income tax treaty article listed above.

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income or proceeds to which this form relates or am using this form to document myself for chapter 4 purposes;
- The person named on line 1 of this form is not a U.S. person;
- This form relates to:
 - (a) income not effectively connected with the conduct of a trade or business in the United States;
 - (b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an applicable income tax treaty;
 - (c) the partner's share of a partnership's effectively connected taxable income; or
 - (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here
☐ I certify that I have the capacity to sign for the person identified on line 1 of this form.

Signature of beneficial owner (or individual authorized to sign for beneficial owner)

Maxime Martin Arthur Cugnon de Sevicourt

Print name of signer

Date (MM-DD-YYYY)

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Maxime Martin Arthur Cugnon de Sevicourt

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☒ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

2141 Wisconsin Avenue NW Apt 502

6 City, state, and ZIP code

Washington, DC 20007

Requester's name and address (optional)

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

7	6	1	-	8	5	-	1	1	1	9
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or

Employer identification number

		-							
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Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ► 5/21/2023

Georgetown University

Attachment to Form W-9 for Resident Alien Claiming Income Tax Treaty Benefits

I confirm the following information is true and correct:

Maxime Martin Arthur Cugnon de Sevracourt

Social Security Number: 761851119

Tax Residency Status: RESIDENT ALIEN as of 7/3/2023

Tax Treaty Country and Article Claimed: France, Article 21

The tax treaty article claimed is based on the “Exception to the Saving Clause”: Yes

Description of Services Performed: Teaching Assistant

Signature

Date

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

OMB No. 1545-0795

► Go to www.irs.gov/Form8233 for instructions and the latest information. ► See separate instructions.**Who Should
Use This Form?****Note:** For definitions of terms used in this section and detailed instructions on required withholding forms for each type of income, see **Definitions** in the instructions.**IF** you are a nonresident alien individual who is receiving. . .**THEN**, if you are the beneficial owner of that income, use this form to claim. . .

Compensation for independent personal services performed in the United States

A tax treaty withholding exemption (Independent personal services, Business profits) for part or all of that compensation.

Compensation for dependent personal services performed in the United States

A tax treaty withholding exemption for part or all of that compensation.

Noncompensatory scholarship or fellowship income **and** personal services income **from the same withholding agent**A tax treaty withholding exemption for part or all of **both** types of income.**DO NOT Use
This Form. . .****IF** you are a beneficial owner who is. . .**INSTEAD**, use. . .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 the Instructions for Form 8233 for how to complete Form 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 by the withholding agent, Form W-4 for the noncompensatory scholarship or fellowship income

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 2023, or other tax year beginning _____ and ending _____.**Part I Identification of Beneficial Owner** (See instructions.)**1** Name of individual who is the beneficial owner **2** U.S. taxpayer identification number **3** Foreign tax identification number, if anyMaxime Martin Arthur Cugnon de761851119**4** Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box.**12 rue Saint Michel

City or town, state or province. Include postal code where appropriate.

Caen, 14000

Country (do not abbreviate)

France**5** Address in the United States (street, apt. or suite no., or rural route). **Do not use a P.O. box.**2141 Wisconsin Avenue NW Apt 502

City or town, state, and ZIP code

Washington, DC 20007**Note:** Citizens of Canada or Mexico are not required to complete lines 7a and 7b.**6** U.S. visa typeF1**7a** Country issuing passportFrance**7b** Passport number22EE27649**8** Date of entry into the United States8/31/2020**9a** Current nonimmigrant statusF1 Student**9b** Date your current nonimmigrant status expires5/22/2027**10** If you are a foreign student, trainee, professor/teacher, or researcher, check this box ☒ **Caution:** See the **line 10 instructions** for the required additional statement you must attach.

Part II Claim for Tax Treaty Withholding Exemption**11** Compensation for independent (and certain dependent) personal services:**a** Description of personal services you are providingTeaching Assistant**b** Total compensation you expect to be paid for these services in this calendar or tax year \$ 33814**12** If compensation is exempt from withholding based on a tax treaty benefit, provide:**a** Tax treaty on which you are basing exemption from withholding U.S. - France Income Tax Treaty**b** Treaty article on which you are basing exemption from withholding Article 21**c** Total compensation listed on line 11b above that is exempt from tax under this treaty \$ 5000**d** Country of residence France**Note:** Do not complete lines 13a through 13d unless you also received compensation for personal services **from the same withholding agent.****13** Noncompensatory scholarship or fellowship income:**a** Amount \$ _____**b** Tax treaty on which you are basing exemption from withholding _____**c** Treaty article on which you are basing exemption from withholding _____**d** 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 (see instructions) _____As set forth on this form, I qualify for an exemption from tax withholding under theU.S. - France Income Tax Treaty, Article 21I have met all of the requirements set forth in the article as verified by the withholding agent (signature below).The required additional statement that details the criteria is attached.**Part III Certification**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the beneficial owner (or am authorized to sign for the beneficial owner) of all the income to which this form relates.
- The beneficial owner is not a U.S. person.
- The beneficial owner is a resident of the treaty country listed on line 12a and/or 13b above within the meaning of the income tax treaty between the United States and that country, or was a resident of the treaty country listed on line 12a and/or 13b above at the time of, or immediately prior to, entry into the United States, as required by the treaty.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner.

Sign Here

Signature of beneficial owner (or individual authorized to sign for beneficial owner)

Date

Part IV Withholding Agent Acceptance and Certification

Name <u>Georgetown University</u>	Employer identification number <u>530196603</u>
Address (number and street) (Include apt. or suite no. or P.O. box, if applicable.) <u>37th and O Streets, NW Box 571173</u>	
City, state, and ZIP code <u>Washington, DC 20057-1013</u>	Telephone number <u>202-687-0175</u>

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

Date

Georgetown University

*Official Attachment to IRS Form 8233
Additional Statement for Students and Trainees*

Name (Last, First)	Country of Tax Residence	Social Security Number/ITIN
Cugnon de Sevracourt, Maxime	France	761851119

I was a resident of France on the date of my arrival in the United States. I am not a U.S. citizen. I have not been lawfully accorded the privilege of residing permanently in the United States as an immigrant.

I am temporarily present in the United States for the primary purpose of studying at Georgetown

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 France in an amount not in excess of \$5,000 for any tax 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.

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. I arrived in the United States on 08/31/2020. The treaty exemption is available for compensation paid during a period of five tax years.

I hereby certify that the information provided above is true and correct to the best of my knowledge. If any of the information changes or if I have reason to believe that I no longer qualify for the exemption claimed above, I will notify the Institution Administrator at 202-687-0175.

Signature

Date



U.S. Tax Information For Non-United States Citizens/Non-U.S. Permanent Resident Aliens

Why Am I Required to Provide Information in GLACIER? The Internal Revenue Service ("IRS"), the U.S. government tax authority, has issued strict regulations regarding the taxation and reporting of payments made to non-United States citizens. As a result, payments made to you may be subject to U.S. income tax and reporting.

Why Is My Tax Status Important? To comply with the U.S. tax laws, your *U.S. Tax Residency Status* must be determined. The Substantial Presence Test determines whether an individual is a *Nonresident Alien* or *Resident Alien* for U.S. tax withholding and reporting. **GLACIER** will calculate your *U.S. Residency Status for Tax Purposes* based on the information provided by you.

What is the Difference between a Nonresident Alien and Resident Alien? If you are a *Nonresident Alien for Tax Purposes*, you are subject to special tax withholding and reporting regulations; if you are a *Resident Alien for Tax Purposes*, you are taxed in the same manner as a U.S. Citizen.

How Long Will I Be a Nonresident Alien? Your *Residency Status Change Date* is the day on which your *U.S. Residency Status for Tax Purposes* will change, generally from *Nonresident Alien for Tax Purposes* to *Resident Alien for Tax Purposes*. The U.S. tax system is based on a calendar year period (January 1 – December 31). In most cases, when your *U.S. Residency Status for Tax Purposes* changes, you will become a *Resident Alien for Tax Purposes* retroactive to the first day of the calendar year during which your status changed; this day is called the *Residency Status Start Date*.

How Will I Be Taxed on Payments From U.S. Sources? As a *Nonresident Alien for Tax Purposes*, U.S. tax law requires that you be taxed in the following manner:

- If you are an employee and receive Dependent Compensation (salary or wages), you are required to complete Form W-4 as "Single or Married Filing Separately", regardless of your actual marital status.
- If you receive a Scholarship or Fellowship (for which NO services are required), your scholarship or fellowship may consist of *Nontaxable items* (Tuition, Book Allowance, and Required Registration Fees) or *Taxable items* (including, but not limited to, Room and Board, Stipend, Living Allowance, Travel Payment/Reimbursement). If you are present in the U.S. under an F, J, M, or Q immigration status, the applicable rate of tax withholding is 14 percent; if you are present in the U.S. under any other immigration status, the applicable rate of tax withholding is 30 percent.
- If you receive an Honorarium, Guest Speaker Fee, Consultant Fees, Royalty, or any other type of income, the applicable rate of tax withholding is 30 percent.

Can I Be Exempt From Tax Withholding? The U.S. maintains income tax treaties with more than 60 countries. Certain taxable payments made to you may be exempt from U.S. tax based on an income tax treaty entered into between the U.S. and your country of tax residence. The existence of a tax treaty does not automatically ensure an exemption from tax withholding; rather, you must satisfy the requirements for the exemption set forth in the tax treaty and provide all applicable forms and documents to your Institution's **GLACIER** Administrator. If you qualify for a tax treaty exemption, you must complete and submit Form W-8BEN (for all non-service scholarships and fellowships, or royalty payments) and/or Form 8233 (for all compensation or payments for services).

What If I Do Not Submit My Forms and Documents? If you do not complete the information in **GLACIER** and/or submit the required forms and documents in a timely fashion, the maximum amount of tax will be withheld from all payments made to you. For instructions of how to submit your forms and documents, please refer to the instruction page generated with your forms; DO NOT send your forms to the **GLACIER** Support Center.

Where Can I Get More Information? If you have additional questions about **why** you were asked to complete **GLACIER**, please contact your Institution's **GLACIER** Administrator or the person at your institution who asked you to complete **GLACIER**. If you have questions about **GLACIER** or the U.S. tax system, please contact the **GLACIER** Support Center at support@online-tax.net.