

I. General Information		Please Provide All Information Requested	Important Information On The Reverse Side
This form is for collection of information and does not cover all documentation that may be required for payments to all visitors. For additional information see: https://guru.psu.edu/tools/NRAPaymentGuidelines.html			
Last or Family Name	First or Given Name	Middle Initial	Country of Residence
Street Address		Telephone Number	Fax Number
City	State or Province	Zip or Postal Code	Country

II. Residency Status – Please check the appropriate box (1, 2, 3, or 4) below to indicate your residency status for tax purposes only.

1 **I AM A UNITED STATES CITIZEN** I hereby certify that I am a citizen of the United States of America.

2 **I AM A PERMANENT RESIDENT** I hereby certify that I have been given privilege, according to U.S. Immigration Laws, of residing permanently in the United States as an immigrant, and that this status has not been revoked, and has not been administratively or judicially determined to have been abandoned. Attach a W-9 Form if receiving income other than expense reimbursement. **Do not attach a W-9 Form if only being reimbursed for expenses**

3 **I AM A RESIDENT FOR TAX PURPOSES** I hereby certify that I am a resident of the United States of America, for tax purposes, because I have met the Substantial Presence Test for residency. **Attach a copy of your I-94 card.** Attach a W-9 Form if receiving income other than expense reimbursement. **Do not attach a W-9 Form if only being reimbursed for expenses**

4 **I AM A NON-RESIDENT FOR TAX PURPOSES** I DO NOT meet the requirements for residency in the United States of America. **Attach a copy of your I-94 card or ESTA passport stamp.**

III. I-94 Designation/Admissions Class/VISA TYPE – Please indicate the Immigration designation you intend to enter the United States with on this trip.

If you checked either box 1 or box 2 in the residency section above, do not complete this section.

B-1 or WB (visa waiver business classification) Entering the U.S. on this visa/I-94/Admission Class will prohibit Penn State from making any payments to you other than the reimbursement of actual travel expenses, unless each requirement in Part IV is satisfied.

B-2 or WT (visa waiver tourist classification) Entering the U.S. on this visa/I-94 Admission Class will prohibit Penn State from making any payments or expense reimbursements to you, unless each requirement in Part IV is satisfied. (Canadian and Mexican residents without an I-94 card must check this designation.)

F-1 Must maintain full-time enrollment as defined by the academic institution; part-time study only with approval of DSO in accordance with INS guidelines **EXPENSES:** You must provide Penn State with I-94, ESTA passport stamp or I-20 forms and **if you are receiving an honorarium you must also submit an 8233 form.**

H-1B **EXPENSES:** You will need to provide Penn State with copies of your visa and your I-94 or ESTA passport stamp. **No honorarium is allowed.**

J-1 Exchange Visitor Entering the U.S. on this visa type will allow Penn State to make payments to you according to form DS-2019. **EXPENSES:** You must provide Penn State with a letter from your host institution authorizing payment (unless you are visiting for an interview) and form DS-2019. **If you received an honorarium you must also submit form 8233.**

Other – please specify: _____

IV. Payments To B1/B2 Visa Holders
Acknowledgements of individuals on a B-1, B-2, WB, WT visa status or those who are exempt from visa requirements. Check those that apply:

The honorarium payment and/or expense reimbursement will relate to an academic activity.

In the last six months, I have not accepted an honorarium or expense reimbursement from more than four other institutions of higher education and/or research institutions within the United States of America.

My activity at The Pennsylvania State University will be for 9 days or less.

Treaty Usage: In order to claim treaty exemption from U.S. Federal Income Tax, you must submit a completed IRS Form 8233 (Exemption from Withholding for Compensation of Independent Personal Services of a Non Resident Individual). These forms (8233 and VISIT forms) must be completed EACH time you wish to claim exemption, even within the same tax year.

I hereby certify, under penalties of perjury, that all of the above information is true and correct.

Signature: _____ Date: _____

SPECIAL NOTE: A Social Security Number is required only for income payments, but is NOT required for expense reimbursement. When required for payments, **Non-residents for tax purposes** should supply their SSN or individual Tax Identification Number directly to their host department.



Visitor's Information Sheet for Income and Travel

Purpose: The purpose of this document is to allow The Pennsylvania State University to collect the necessary information to smoothly and efficiently handle the details of your upcoming visit to our institution. Please return completed form to your host as soon as possible.

I. General Information Personal data requested in the first section of this document (name, address, etc) will be used in the preparation of various university forms as they pertain to your visit. In most cases, any eligible payments to be made to you will be based on this information.

Please note that there are two fields requesting country. The block labeled as "Country" is for your mailing address. The block labeled "Country of Residence" is the country which is your tax home.

II. Residency Status This section is used by the University to establish (by your declaration), the determination of your tax residency. An alien will not be considered a United States Resident for Tax Purposes unless the individual is:

A. *a lawful permanent resident of the United States at any time during the calendar year, OR*

B. *able to meet the Substantial Presence Test as specified by the Internal Revenue Service regulations.*

Only those individuals who can claim to be a Non-Resident for tax purposes can claim treaty benefits for exemption from U.S. federal income taxes. If you wish to find out whether you qualify for treaty benefits, have your host contact Accounting Operations at Penn State University.

III. Visa Type/I-94 Designation This section is to notify Penn State as to which type of Visa or I-94 designation you intend to use to enter the United States. For those visitors who are from countries that participate in the Visa Waiver Program, please note that Penn State can only reimburse actual expenses for those that enter under the "business" classification, unless you satisfy the federal law requirements listed in Part IV of this form. Business classification is noted as a "WB" on a card placed in your passport upon entry to the United States, known as an I94 card. If you are unsure as to the type of Visa classification you should attempt to attain, contact your host at The Pennsylvania State University.

IV. Payments To B1/B2 Visa Holders The American Competitiveness Workforce Act allows payment of honoraria or incidental expenses to B-1, B-2, WB, and WT visa holders for "usual academic activity," if paid by a United States institution of higher education, a nonprofit, or a governmental research organization. Under the Act, an academic activity may not exceed nine days at a single institution. In addition, such visa holders cannot accept honoraria and/or incidental expenses from more than five institutions or organizations in the previous six month period. **Instead of B1/B2 status (not eligible to obtain US Social Security number), Short-term Scholar status should be used by all visitors expecting payment (other than expenses) if the visitor does not have a Social Security or Tax Payer Identification Number.**

Affirmation: Your signature on this document represents that the information you have provided is both true and accurate. It also signifies that you understand it is your responsibility to enter the U.S. on this trip with the appropriate Visa, so that Penn State can honor the commitments made to you by your host.

If you have any questions regarding this document, contact your host as soon as possible in order to expedite the preparations needed for your upcoming visit.

Host's Name:

--

Address:

--

--

Phone Number:

--

Fax Number:

--

Internet Address:

--