

FOREIGN NATIONAL TAX INFORMATION COLLECTION FORM

Current Federal laws state that if you are not a United States Citizen we must ask to see these documents and perform a tax residency analysis before you can receive any form of payment. The requested information is strictly confidential and will be used for tax withholding and reporting purposes only. All applicable questions below must be answered and copies of the following documents must be provided and attached to this completed form:

1. Copy of Passport page showing name, number and photo;
2. Copy of U.S. Visa;
3. Copy of I-94 (front and back) Form "Arrival and Departure Record", small white card inside your passport;
4. Copy of Form I-20 or DS 2019 (primary purpose);
5. Copy of Social Security or Individual Taxpayer Identification Number (ITIN).

Additional Guidance is available on page 2

| | | | | | | |
|---------------------------------------|--|--|---------------------------------------------|--|---------------------|--|
| <i>(1) Last or Family Name:</i> | | | <i>First Name:</i> | | <i>Middle:</i> | |
| <i>(2) Social Security or ITIN #:</i> | | | <i>(3) Date of Birth:</i> | | <i>(MM/DD/YYYY)</i> | |
| <i>(4) U.S. Local Street Address:</i> | | | <i>(5) Foreign Residence Address:</i> | | | |
| <i>City:</i> | | | <i>State:</i> | | <i>Zip:</i> | |
| <i>City:</i> | | | <i>Province/Region:</i> | | | |
| <i>Email Address:</i> | | | <i>Country:</i> | | | |
| <i>Phone Number:</i> | | | <i>Postal Code:</i> | | | |
| <i>(6) Passport Number</i> | | | <i>(7) U.S. I-94 Arrival/Departure No.:</i> | | | |
| <i>Expiration Date:</i> | | | <i>(8) Country of Citizenship:</i> | | | |

| | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <i>(9) What is your current immigration status?:</i> <input type="checkbox"/> F-1 Student <input type="checkbox"/> H1-B Employee <input type="checkbox"/> J-1 Student <input type="checkbox"/> B-1 Business Visitor <input type="checkbox"/> J-1 Research Scholar <input type="checkbox"/> Refugee or Asylee <input type="checkbox"/> J-1 Professor <input type="checkbox"/> Other _____ | | <i>(10) When did you arrive in the United States under this Immigration status</i> | <i>(11) What is the Issue (start) date of your U.S. Visa Status?</i> | <i>(12) What is the expiration date of this current immigration status?</i> |
| | | | | |

What is the primary activity of your current immigration status? Check one:

| | | |
|-----------------------------------------------------------|----------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Studying in a Degree Program | <input type="checkbox"/> Training | <input type="checkbox"/> Temporary Employee |
| <input type="checkbox"/> Studying in a Non-Degree Program | <input type="checkbox"/> Teaching | <input type="checkbox"/> Here with Spouse |
| <input type="checkbox"/> Demonstrating Special Skills | <input type="checkbox"/> Lecturing | <input type="checkbox"/> Observing |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Conducting Research | <input type="checkbox"/> Clinical Activities |

(14) If a degree candidate, what degree program are you in now? Undergraduate Masters Doctoral Other:

Estimate the semester/year completing the program:

(15) Have you ever entered the United States under the current or different immigration status? No Yes
(If Yes, complete below. If no, go to Question 16)

| Date of Entry | Date of Exit | With what VISA type? | Primary Activity | Did you take any Treaty Benefits? |
|---------------|--------------|----------------------|------------------|----------------------------------------------------------|
| | | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| | | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| | | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| | | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |

If you have any questions regarding this form, please contact:

Chico State Enterprises
 25 Main Street Suite 203
 Chico, Ca. 95928-5388
 (530) 898-6811
 www.csuchico.edu/cse

FOREIGN NATIONAL TAX COLLECTION INFORMATION FORM

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| (16) Are you completing this form for employment? <input type="checkbox"/> No <input type="checkbox"/> Yes (if Yes, continue on right otherwise go to Question 18) | What is your job title ? (e.g. Student Assistant, Researcher, Staff) |
| (17) Do you currently have another job(s) on campus? <input type="checkbox"/> No <input type="checkbox"/> Yes (if Yes, LIST your (a) job title, (b) name of the department and employer (AS or CSUC) and (d) start date, below) | Employment Start Date: _____ Supervisor's Name and Phone No.: _____ |
| (18) Have you attended another U.S. Educational Institution? <input type="checkbox"/> No <input type="checkbox"/> Yes if Yes, Name of Institution: _____ Period of Attendance From: _____ To: _____ | What Department/Project do you work for? |

(19) Is your tax residence/home the same as your foreign residence address? No Yes
 If No, name the country of your Tax Residency /Home: _____

(20) Marital Status Married Single (if "Married", continue, otherwise go to Question 21)

(21) Under penalties of perjury, I hereby certify that all of the above information is COMPLETE, TRUE and CORRECT. I understand that if my status changes from that which I have indicated on this form I must submit a new Foreign National Tax Collection Information Form.

Signature _____ Date: _____

(22) If your country has a tax treaty with the U.S., but you elect NOT to use these benefits, please sign and date below.

Signature _____ Date: _____

Additional Guidance for completing the Foreign National Tax Collection Information Form

- (2) Social Security Number: Enter US Social Security number issued by the US Social Security Administration, not your student ID number. Do not list numbers not assigned by United States Social Security, e.g., Canadian Social Security number. All employees must have a Social Security number in order to work. If no, enter your Individual Tax Payer Identification Number (ITIN) issued by the IRS.
- (5) Foreign Residence: List your non US (permanent home) address.
- (6) Country that Issued Passport: List country which issued your passport, not the country where it was issued.
- (7) U.S. I-94 Arrival/Departure Number. This record (pre-numbered) is stapled to a page of your passport and given by the Immigration & Naturalization Inspector at an authorized Port of Entry.
- (9) Immigration Status: Check the type of immigration status that you currently hold. If you are a U.S. Immigrant/Permanent Resident (holder of a "green" card) you may skip to page two, #21, sign and date.
- (10) Actual date you entered the United States. The date is on your I-94 Arrival/Departure card. Approximate if you don't know.
- (11) Actual start of your U.S. Visa. It is the issue date of your U.S. Visa. Approximate if you don't know.
- (12) Actual end date of your immigration status. The date is on your I-20 or DS 2019.
- (13) The primary activity of your visit should be stated on INS documents such as your I-20 or DS 2019.
- (15) Immigration Status: check Yes or No. If Yes, list all visa immigration activity in the last 5 calendar years for the time(s) you were present in the United States under a different immigration status. Approximate if you do not know dates.
- (19) List your tax residency or home country. It is where you pay taxes. In case you currently do not have a permanent tax residency or home country, write the name of the country where your financial sponsor (usually parents or other family member) regularly works and pays income taxes.

Office Use ONLY

Substantial Presence Test

The Substantial Presence Test is used to calculate the number of days that a Non-resident has been physically present in the U.S.

NOTE: If you have no days to include in your calculations, enter a "0" on the line for "Number of Days in U.S.".

Immigration Status: _____
 Primary Purpose: _____
 Date of Entry: _____
 Prior Visits: _____

| |
|------------------------------|
| <p>Time Continuum</p> |
|------------------------------|

| |
|----------------------------|
| <p>Exempt Years</p> |
|----------------------------|

| | | | |
|---------------|--|---------|--|
| Current Year | | ÷ 3 = | |
| Previous Year | | ÷ 6 = | |
| Previous Year | | TOTAL = | |

Residency Status For Tax Purposes: _____
 Residency Status Change Date: _____
 Residency Status Start Date: _____