



UNIVERSITY OF WASHINGTON  
**FOREIGN NATIONAL  
PAYMENT DATA SHEET**

**When this form is required, it is to be completed by the foreign national. See instruction sheet.**

The information provided on and attached to this form will be used to determine federal tax withholding requirements for compensation that you receive from the University of Washington. Please provide all information requested. Failure to do so may result in improper withholding of taxes and/or assessment of penalties by the Internal Revenue Service. Note to department: Submit completed form with all necessary attachments to the paying department (See attached instructions). **Original must be received before a check can be issued.**

**Part I. PERSONAL INFORMATION**

|  |                             |  |   |
|--|-----------------------------|--|---|
| U.S. SOCIAL SECURITY NUMBER OR U.S. INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER (if any)*<br><small>* We are requesting this per IRC Section 1441.</small> | 1. U.S. SSN or ITIN*<br>— — | 2. Payment type (please check)<br><input type="checkbox"/> Travel<br><input type="checkbox"/> Student Student # <input type="text"/> | <input type="checkbox"/> Independent Contractor<br><input type="checkbox"/> Stipend/Wages |
| 3. Name (Last)   | (First)                     | (Middle)   | 3b. EID   |

**CITIZENSHIP AND NONIMMIGRANT VISA STATUS INFORMATION**

|   |                         |  |
|---|-------------------------|--|
| 4. Country of Citizenship   | 5. Country of Residence | 6. Candidate for a U.W. degree<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. When does your permission to stay in the U.S. expire?<br>Date: |                         |  |
| 8. When does your work authorization expire?<br>Date:             |                         |  |

**PERMANENT MAILING ADDRESS IN COUNTRY OF RESIDENCE**

9.

**CURRENT VISA STATUS**

<sup>10</sup>. After arrival in the U.S., visa status will be verified by the I-94 or I-94 W and a copy of picture page of passport for all foreign nationals, except Canadians\*. I-94 or I-94W must be copied (front and back) by your UW host department while you are in the U.S. Failure to provide the I-94 or I-94W for photocopying will result in the inability of the University of Washington to make payment to you.

**A. My visa status is (check one):**

|   |  |   |
|---|--|---|
| <input type="checkbox"/> B-1 Business   | <input type="checkbox"/> WB Business Waiver            | <input type="checkbox"/> H-1B Temporary Worker  |
| <input type="checkbox"/> B-2 Tourist  | <input type="checkbox"/> WT Tourist Waiver             | <input type="checkbox"/> J-1 Non-student Exchange Visitor (must attach copy of DS-2019)   |
| <input type="checkbox"/> F-1 Student (must attach copy of I-20)<br>specify name of sponsoring Institution _____ | <input type="checkbox"/> Canadian without visa         | <input type="checkbox"/> J-1 Student Exchange Visitor (must attach copy of DS-2019)<br>specify name of sponsoring institution _____ |
|   | <input type="checkbox"/> Employment Authorization Card |   |
|   | <input type="checkbox"/> Other (specify): _____        |   |

**B. Date of Entry**

Date of entry into the U.S. under this visa status? \_\_\_\_\_  
Intended length of stay in the U.S. under this visa status? \_\_\_\_\_

\* Canadians, in circumstances where neither a visa nor I-94W is required, you must present passport, or one government-issued picture ID [such as a Canadian driver's license] AND one other government issued document for photocopying.

**C. U.S. Residency**

11. Have you ever been in the United States before?  Yes  No If Yes, complete the visit information in Question 13. If you need more space, check here  and continue on the back of this page. If No, continue to Part II.

**D. Length of Stay**

12. Will you be in the United States 31 days or more this calendar year (January through December)?  Yes  No If Yes, complete the visit information in Question 13. If you need more space, check here  and continue on the back of this page. If No, continue to Part II.

| 13. VISIT 1:      |                    | 14. VISIT 2:      |                    | 15. VISIT 3:      |                    |
|-------------------|--------------------|-------------------|--------------------|-------------------|--------------------|
| Visa Status       | Activity           | Visa Status       | Activity           | Visa Status       | Activity           |
| Date entered U.S. | Date departed U.S. | Date entered U.S. | Date departed U.S. | Date entered U.S. | Date departed U.S. |

**Part II. TAX TREATY INFORMATION (Complete this section if being paid for services)**

16. Does your country of residence have a tax treaty with the United States?  Yes  No If Yes, do you desire to claim exemption from withholding in accordance with tax treaty provisions?  Yes  No

If Yes to both questions above and you are being compensated, IRS Form 8233 or W8-BEN (See instructions for detail):  Is attached to this form  
 Has been previously submitted to my UW host department

IRS Form 8233 (Form) <http://www.irs.gov/pub/irs-pdf/f8233.pdf>      IRS Form 8233 (Instructions) <http://www.irs.gov/pub/irs-pdf/i8233.pdf>

Tax Treaties can be found at: <http://www.irs.gov/businesses/international/article/0,,id=96739,00.html>

W8-BEN and Instructions <http://www.washington.edu/admin/payroll/w8benpackage.pdf>

**NOTE: IRS Form 8233 and W8BEN require a U.S. Taxpayer Identification Number to apply for a tax treaty benefit.**

**Part III. TO BE COMPLETED BY VISITORS FROM BARBADOS, GREECE, JAMAICA, REPUBLIC OF KOREA, MOROCCO, PHILIPPINES, THAILAND, TRINIDAD AND TOBAGO, AND TUNISIA:**

17. **EARNINGS INFORMATION** Excluding this payment, please list all payments you have received during each visit in the United States during this calendar year. If necessary use an additional sheet of paper.

| Payment For | Amount | Payer |
|-------------|--------|-------|
|             |        |       |
|             |        |       |

**Part IV. TO BE COMPLETED BY VISITORS IN B-1, B-2 OR WB/WT STATUS ONLY AND CANADIANS ARRIVING WITHOUT A VISA:**

18. The American Competitiveness and Workforce Improvement Act (ACWIA) allows international visitors in Business or Tourist (B-1/B-2, WB/WT) travel status to be paid honoraria or be reimbursed for travel expenses only if all of the following conditions are met:

- You are a visitor performing services of academic activities (short term instruction including guest lectures, seminars, presentations, workshops, laboratory demonstrations, and special programs; research consultation and collaboration; participation in consortium activities; or, advisory committees) associated with the University of Washington. (Payment is made for services conducted for the benefit of the UW. Participation as a trainee only does not qualify as performance of services conducted primarily for the benefit of the UW).
- and
- Your activity being compensated is any portion of nine days or less at the University of Washington,
- and
- You have not been paid or reimbursed by more than five U.S. institutions or organizations during the past six months including the University of Washington.

All of the above statements are true (check one):  Yes  No

**Part V. TEST FOR DETERMINING RESIDENCY FOR TAX PURPOSES**

Information regarding this section is explained in IRS Publication 519 found at: [www.irs.gov/pub/irs-pdf/p519.pdf](http://www.irs.gov/pub/irs-pdf/p519.pdf)

**DETERMINATION OF RESIDENCE STATUS FOR FEDERAL WITHHOLDING TAX**

An alien will not be considered a United States resident for tax purposes unless the individual:

- a. Is a lawful permanent resident of the U.S. Attach a copy of your Alien Registration (Green Card).
- b. Is able to meet the substantial presence test as specified by IRS regulations.

Please complete the following **TESTS FOR DETERMINING RESIDENCY FOR TAX PURPOSES**

| 19.   | Test 1<br>U.S. Residence Status Test                  | <input type="checkbox"/> I am a lawful permanent resident of the U.S. Attach a copy of your Alien Registration (Green Card).<br><input type="checkbox"/> I am an immigrant or refugee seeking asylum in the U.S.<br><i>If either box was marked, you are a RESIDENT ALIEN for tax purposes. STOP. Enter this in Question 23, Summarize Results, below, otherwise continue to Test 2.</i>  |               |              |              |               |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |
|---|---|---|---------------|--------------|--------------|---------------|--------------|--|-------|---|--|--|--|--|-------|--|--------------------------|--|--|--|--|---------|--|------------------------------|--|--|--|--|---------|--|
| 20.   | Test 2<br>Exemption From Substantial Presence Test    | <input type="checkbox"/> I am in the United States as a teacher, trainee or researcher on a J-1 visa for less than two of the preceding six calendar years.<br><input type="checkbox"/> I am a student on a F-1 or J-1 visa and have been in the United States for five or fewer calendar years.<br><input type="checkbox"/> I am a student on a F-1 or J-1 visa and have been in the United States for more than five calendar years and have established with the IRS that I do not plan to reside in the United States when my education is completed. Attach proof from IRS.<br><i>If any box was marked, you are a NON-RESIDENT ALIEN for tax purposes. Enter in Question 23, below, otherwise continue to Test 3.</i>   |               |              |              |               |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |
| 21.   | Test 3<br>Substantial Presence Test                   | <p>Complete the spaces below indicating the number of days present or will be present in the U.S. during the years listed. Do not count days you were "exempt." If you are a student on a F or J visa, generally you are "exempt" for the first 5 calendar years you are in the U.S. If you are a teacher or researcher on a J visa, generally you are "exempt" for the first 2 calendar years you are in the U.S.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 5px;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 10%;">Year</th> <th style="width: 10%;">Date Entered</th> <th style="width: 10%;">Date Departed</th> <th style="width: 10%;">Days in U.S.</th> <th style="width: 10%;"></th> <th style="width: 10%;">TOTAL</th> </tr> </thead> <tbody> <tr> <td>Number of days you expect to be in U.S. in the current Year</td> <td></td> <td></td> <td></td> <td></td> <td>X 1 =</td> <td></td> </tr> <tr> <td>Number of days Last Year</td> <td></td> <td></td> <td></td> <td></td> <td>X 1/3 =</td> <td></td> </tr> <tr> <td>Number of Days Two Years Ago</td> <td></td> <td></td> <td></td> <td></td> <td>X 1/6 =</td> <td></td> </tr> </tbody> </table> <p><i>If the total is less than 183, you are a NON-RESIDENT ALIEN for tax purposes. Enter this in Question 23, Summarize Results, below. If total is 183 or greater, complete Test 4.</i></p> <p style="text-align: right;">TOTAL = <span style="border: 1px solid black; display: inline-block; width: 80px; height: 20px; vertical-align: middle;"></span></p> |               | Year         | Date Entered | Date Departed | Days in U.S. |  | TOTAL | Number of days you expect to be in U.S. in the current Year |  |  |  |  | X 1 = |  | Number of days Last Year |  |  |  |  | X 1/3 = |  | Number of Days Two Years Ago |  |  |  |  | X 1/6 = |  |
|   | Year  | Date Entered  | Date Departed | Days in U.S. |              | TOTAL         |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |
| Number of days you expect to be in U.S. in the current Year |   |   |               |              | X 1 =        |               |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |
| Number of days Last Year                                    |   |   |               |              | X 1/3 =      |               |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |
| Number of Days Two Years Ago                                |   |   |               |              | X 1/6 =      |               |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |
| 22.   | Test 4<br>Exceptions to the Substantial Presence Test | <p>Have you been or do you plan to be in the U.S. for fewer than 183 days in the current year, <u>and</u> do you pay taxes in your country of residence, <u>and</u> do you have a closer connection to that country than to the U.S.?</p> <input type="checkbox"/> Yes. I am a NON-RESIDENT ALIEN for tax purposes<br><input type="checkbox"/> No. I am a RESIDENT ALIEN for tax purposes<br><i>Enter this in Question 23, Summarize Results, below.</i>  |               |              |              |               |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |
| 23.   | Summarize Results:                                    | <p>Check the appropriate box for tax purposes:</p> <p>I am a: <input type="checkbox"/> RESIDENT ALIEN<br/> <input type="checkbox"/> NON-RESIDENT ALIEN</p>  |               |              |              |               |              |  |       |   |  |  |  |  |       |  |                          |  |  |  |  |         |  |                              |  |  |  |  |         |  |

**Part VI. CERTIFICATION OF INFORMATION PROVIDED**

24. I certify that to the best of my knowledge and belief, all the information that I have provided on this form is true and correct.

|                            |                     |                     |
|----------------------------|---------------------|---------------------|
| Signature _____ Date _____ | Department _____    | Box Number _____    |
|                            | Contact Email _____ | Contact Phone _____ |

**See the instructions page for any assistance in answering these questions.**