

Reset Form

Print Form



LIBERTY UNIVERSITY

Foreign National Information Form for Non-Payroll Related Payments

The purpose of this form is to obtain additional information from foreign national payees so that Liberty University, as withholding agent, can determine if claims of tax treaty benefits by payees are reasonable.

Liberty University Purchasing Department 1971 University Blvd. Lynchburg, VA 24502 Fax: 434-522-0424

Have we received a Foreign National information Form from you already Yes No

If you answered Yes, you may simply attach a copy of the ForeignNational Information Form from your prior visit. If you answered No, please continue to

PAYMENT ELIGIBILITY (Completed by Department and Accompanied by Form I-94)

I-94 Number of International Visitor, I-94 Expiration Date, Name of Department Contact, School or Department, Phone, Fax, E-mail Address

- 1. Is this individual currently in the U.S.?
2. If you answered Yes to Question #1, does this individual possess a Valid (unexpired) Form I-94 Arrival/Departure Record marked B-1, B-2, WB or WT?
3. Will this individual perform a "usual academic activity or activities" that are for the benefit of the University?
4. Will this/these "usual academic activity or activities" last longer than nine days?
5. Has this individual accepted such payment or expenses from more than five institutions or organizations in the previous six-month period?

TREATY ELIGIBILITY (Completed by Payee)

Basic Information

Last Name, First Name, Middle Initial, Social Security Number or Individual Taxpayer Identification Number

Department at Institution, Home Phone in U.S., Day Phone in U.S., Date First Ever Entered U.S., E-mail Address

Personal Information

Date of Birth, Marital Status, Spouse here in U.S., Spouse working in U.S.

If you do not have any dependents (not including spouse) or if you are not from any of the countries listed here, skip to U.S. Address below.

Number of dependents (not including spouse): *[If none, write "0"]*

If you are a national of American Samoa, the Northern Mariana Islands, or the U.S. Virgin Islands, or you are a tax resident of Canada or Mexico, enter your total number of dependents:

If you are a tax resident of the Republic of Korea (South), enter your total number of dependents who were with you in the U.S. at some time in the calendar year:

If you are a resident of India who entered the U.S. for the primary purpose of studying, enter your dependents who are U.S. citizens or residents:

Number
<input type="text"/>
<input type="text"/>
<input type="text"/>

**U.S. Address:**

Use U.S. Address for 1042S Mailer Slip?

Address Line 2: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 3: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Foreign Address:**

Use Foreign Address for 1042S Mailer Slip?

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Address Line 3: \_\_\_\_\_

City: \_\_\_\_\_ Regional Postal Code: \_\_\_\_\_

Province/Region: \_\_\_\_\_

Country: \_\_\_\_\_

**Country Information:**

Country of Passport/Citizenship: \_\_\_\_\_ Passport Number: \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_  
(Example: 01-JAN-07)

**Visa Details:**

Please list your current visa status in the first row. In the following rows, list all immigration activity in the last three calendar years or any F, J, M, or Q visa immigration activity since 01-JAN-1985.

Visa Type/ Immigration Status	J-1 Subcategory	Primary Purpose of Visit	Country of Tax Residence	Treaty Benefit Taken As	Visa Number	First Day in U.S.	Last Day in U.S.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Information:  
(Year Income)**

Do you have an office regularly available to you in the U.S.?  Yes  No

If yes, how many days in this calendar year is the office available to you?

Are you the recipient of a grant? (i.e. a non-service scholar or fellowship)  Yes  No

Is this payment an Award or Prize?  Yes  No

Is this payment a Royalty?  Yes  No

Have you submitted an application to become a U.S. lawful permanent resident?  Yes  No

Have you proven to the I.R.S. that you have a closer connection to a foreign country than to the U.S.A.  Yes  No

Are you engaged in a full-time program?  Yes  No

I hereby authorize Liberty University to release information contained in this document to Windstar Technologies, Inc., P.O. Box 800; 1504 Providence Hwy., Suite 13; Norwood, MA 02062-0800 for the following purpose: technical support for the International Tax Navigator system.

I hereby certify that all of the above information is true, complete 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 Information Form to the Accounts Payable Department.

Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_