

IU INTERNATIONAL TAX QUESTIONNAIRE

To be completed by all international visitors

Instructions for International Tax Questionnaire (ITQ)

Step 1: Complete appropriate pages of questionnaire

Page 1: To be completed by all international visitors

Page 2: To be completed by international visitors receiving wages or salary as an employee of Indiana University

Page 3: To be completed by international students at Indiana University

Page 4: To be completed by independent contractors, short-term visitors, research participants, and all other non-U.S. persons receiving payments from Indiana University

Step 2: Send completed ITQ, copy of I-94, and sponsoring document (e.g. I-20, DS-2019) to:

Financial Management Services, Poplars Bldg Room 509, Bloomington, IN 47405 OR

**** IUPUI Employees ONLY: IUPUI Payroll, UN442, Indianapolis, IN 46202**

Individual Information – Basic Info

1. Last Name (Family Name) or Legal Name of Business Entity: _____
2. Middle Name: _____ 3. First Name (Given Name): _____
4. Date of Birth (Month/Day/Year): ____/____/____
5. Tax ID Number - Social Security (SSN) OR Individual Taxpayer Identification (ITIN) OR Employer Identification (EIN)
 SSN: _____ ITIN: _____ EIN: _____

Individual Information – USA Address and Foreign Address

6. United States Address Line 1: _____
 Address Line 2: _____
 City: _____ State: _____ Zip: _____
7. Foreign Address Line 1: _____
 Line 2: _____
 City: _____ City Postal Code: _____
 Province/Region: _____
 Province/Region Postal Code: _____ Country: _____

Individual Information – Personal Info

8. Telephone Number: (____) _____ - _____ 9. Email Address: _____
10. Date that you first entered the United States (U.S.) in your lifetime (Month/Day/Year): ____/____/____

Individual Information – Country Info

11. Country that issued passport: _____
12. Country of tax residence (where you pay taxes outside of the United States): _____

Individual Information - Def Income 2

13. Have you applied for Lawful Permanent Residence in the United States: _____ Yes _____ No
14. Have you received Lawful Permanent Resident Status (green card): _____ Yes _____ No
 Please enter the number here and attach a copy of the card _____
15. Do you wish to claim exemption from tax withholding if tax treaty benefits are available: _____ Yes _____ No
16. Have you claimed a tax treaty exemption in prior calendar years? If yes, please provide the following information:

<u>Calendar Year</u>	<u>Treaty Country of Benefits</u>	<u>Benefits Claimed under Article</u> (Study, Teaching, Research, Other)
_____	_____	_____
_____	_____	_____

I declare that my responses to this questionnaire are true and complete.

Signature: _____ Date: _____

INTERNATIONAL TAX QUESTIONNAIRE

To be completed by international visitors receiving wages or salary as an employee of Indiana University

Last Name: _____ **First Name:** _____

Employment definition: You are probably an IU employee if IU makes payments to you on a fixed schedule (biweekly, monthly) based on hours worked under the direction and control of another university faculty or staff member. You may have a required number of hours to perform a service, or a set schedule for which you are expected to be working on behalf of IU.

Employee examples: Associate instructor, graduate assistant, research or teaching assistant, hourly paid work, teacher, researcher, professor, individual on OPT/CPT.

Individual Information – Basic Info

17. University ID Number (10 digits): _____

Individual Information – Personal Info

18. Name of Department performing services for: _____

19. Job Title or Occupation: _____ **20.** Estimated annual income: _____

Visa Detail

21. Please check your current immigration status and primary purpose:

_____ **J-1 Student – Select primary purpose**

_____ Degree seeking _____ Non-degree seeking _____ Full-time Academic Training

_____ **J-1 Non-student – Select Category and Primary purpose**

Category listed on DS-2019:

_____ Teacher _____ Professor _____ Research Scholar _____ Alien Physician _____ Camp Counselor
 _____ Short-term Scholar _____ Trainee – Medical _____ Trainee (non-medical) _____ Summer Travel/Work

Primary Purpose:

_____ Teaching _____ Lecturing _____ Observing _____ Conducting Research
 _____ Clinical Activities _____ Practical Training _____ Short-term Scholar _____ Summer Travel/Work
 _____ Other _____

_____ **J-2 – Here with J-1 Spouse/Parent**

_____ **F-1 student – Select primary purpose**

_____ Degree seeking _____ Non-degree seeking _____ Full-time OPT/CPT

_____ **H-1B – Select primary purpose**

_____ Teaching _____ Lecturing _____ Clinical Activities _____ Research _____ Other temp employment

_____ **Other visa type – list immigration status and specify primary purpose:** _____

22. Please provide details about your visit history to the U.S. for the last six (6) years as accurately as possible:

<u>Visa Type</u>	<u>Primary Purpose</u> (Study, Research, etc)	<u>Date Arrived</u> (M/D/Y)	<u>Date Departed</u> (M/D/Y)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I declare that my responses to this questionnaire are true and complete.

Signature: _____ Date: _____

INTERNATIONAL TAX QUESTIONNAIRE

To be completed by international students at Indiana University

Last Name: _____ **First Name:** _____

Student definition: You are an IU student for purposes of this documentation if you are enrolled in at least one credit hour of coursework or you were enrolled at any time during the current calendar year.

Scholarship/Fellowship definition: The receipt of money for the purpose of study, training, or research. The income for this purpose may be described as a tuition reduction, living allowance, stipend, scholarship, fellowship, fee remission, research, travel award, or other award to name a few. Income from a family member to assist with educational or living expenses is not a scholarship/fellowship.

23. Are you currently enrolled as a student at Indiana University: _____ Yes _____ No

Individual Information - Def Income 1

24. The scholarship/fellowship is provided to pay the following types of expenses (select all that apply):

_____ Tuition, required fees, or both

_____ Living expenses, travel, research, or any other type of fee that is not required for enrollment

Individual Information - Def Income 2

25. Is your primary purpose that of a student? If so, please select one of the following student types:

_____ Undergraduate Student

_____ Graduate Student

_____ Medical Student

_____ Post Graduate Student

_____ Post Doctoral Student

26. Are you enrolled in a full-time program: _____ Yes _____ No

Year Income - Scholarship

27. Indicate the source of the scholarship/fellowship income:

_____ Indiana University

_____ Foreign Government

_____ International Organization

_____ Charitable Organization

_____ other – Please describe: _____

Visa Detail

28. Please check your current immigration status and primary purpose:

_____ **J-1 Student – Select primary purpose**

_____ Degree seeking

_____ Non-degree seeking

_____ Full-time Academic Training

_____ **F-1 student – Select primary purpose**

_____ Degree seeking

_____ Non-degree seeking

_____ Full-time OPT/CPT

_____ **Other visa type – list immigration status and specify primary purpose:** _____

29. Please provide details about your visit history to the U.S. for the last six (6) years as accurately as possible:

<u>Visa Type</u>	<u>Primary Purpose</u> (Study, Research, etc)	<u>Date Arrived</u> (M/D/Y)	<u>Date Departed</u> (M/D/Y)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I declare that my responses to this questionnaire are true and complete.

Signature: _____ Date: _____

INTERNATIONAL TAX QUESTIONNAIRE

To be completed by independent contractors, short-term visitors, research participants, and all other non-U.S. persons receiving payments from Indiana University

Last Name (Family Name) or Legal Name of Business Entity: _____

First Name: _____

Independent Contractor or Short-term visitor definition: Individual or entity performing services for Indiana University on a short-term, independent basis. Payments are generally made in a lump-sum payment or in installments based on the performance of the service or completion of projects. Visitors in this status generally have a contractual agreement with the university or an offer to perform for a short duration. Payments may be in the form of compensation for services or travel.

Short-term visitors may receive payments to aide in the pursuit of study, training, or research for the visitors benefit but are not an enrolled student or employee. Payments for these visitors generally cover living, research, or travel expenses.

Independent Contractor or Short-term visitor examples: Speaking, lecturing, attending a conference or seminar; musician or other performing artist; perform research in collaboration with IU on short-term basis; perform research independent of IU for visitors benefit.

Individual Information - Def Income 1

30. Are you receiving payment for self-employment (example is honorarium): _____ Yes _____ No

31. Are you receiving payment as an artist or athlete: _____ Yes _____ No

32. Are you receiving payment for living, research, or travel expenses: _____ Yes _____ No

Individual Information - Def Income 2

33. Do you have an office or fixed base in the U.S (for self-employment only): _____ Yes _____ No

34. If yes to question 3, enter number of days this office is AND will be available: _____

Year Income – Self-Employment

35. How many days will you be performing services in the U.S. this calendar year? _____

Visa Detail

36. Please check your current immigration status and primary purpose:

_____ **J-1 Non-student – Select primary purpose**

_____ Teaching _____ Lecturing _____ Observing _____ Conducting Research _____ Clinical Activities
_____ Practical Training _____ Short-term Scholar _____ Summer Travel/Work _____ other _____

_____ **H-1B – Select primary purpose**

_____ Teaching _____ Lecturing _____ Research _____ Clinical Activities _____ Other temporary employment

_____ **F-1 or J-1 student – Select primary purpose**

_____ Degree seeking _____ Non-degree seeking _____ Full-time OPT/CPT _____ Full-time Academic Training

_____ **B-1, B-2, WB, WT**

_____ **Other visa type – list immigration status and specify primary purpose:** _____

37. Please provide details about your visit history to the U.S. for the last three (3) years as accurately as possible:

<u>Visa Type</u>	<u>Primary Purpose</u> (Study, Research, etc)	<u>Date Arrived</u> (M/D/Y)	<u>Date Departed</u> (M/D/Y)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I declare that my responses to this questionnaire are true and complete.

Signature: _____ Date: _____