



## ***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 – Basic Info**

24. University ID Number (10 digits): \_\_\_\_\_

**Individual Information - Def Income 1**

25. 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**

26. 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

27. Are you enrolled in a full-time program: \_\_\_\_\_ Yes \_\_\_\_\_ No

**Year Income - Scholarship**

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

\_\_\_\_\_ Indiana University

\_\_\_\_\_ Foreign Government

\_\_\_\_\_ International Organization

\_\_\_\_\_ Charitable Organization

\_\_\_\_\_ other – Please describe: \_\_\_\_\_

**Visa Detail**

29. 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:** \_\_\_\_\_

30. 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**

**31.** Are you receiving payment for self-employment (example is honorarium): \_\_\_\_\_ Yes \_\_\_\_\_ No

**32.** Are you receiving payment as an artist or athlete: \_\_\_\_\_ Yes \_\_\_\_\_ No

**33.** Are you receiving payment for living, research, or travel expenses: \_\_\_\_\_ Yes \_\_\_\_\_ No

### **Individual Information - Def Income 2**

**34.** Do you have an office or fixed base in the U.S (for self-employment only): \_\_\_\_\_ Yes \_\_\_\_\_ No

**35.** If yes to question 34, enter number of days this office is AND will be available: \_\_\_\_\_

### **Year Income – Self-Employment**

**36.** How many days will you be performing services in the U.S. this calendar year? \_\_\_\_\_

### **Visa Detail**

**37.** 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:** \_\_\_\_\_

**38.** 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: \_\_\_\_\_