

I. GENERAL INFORMAT	'ION PLEASE PROVIDE ALL INFO	ORMATION REQUESTED IM	IPORTANT INFORMATION ON THE SECOND PAGE
This form is for collection of i to all non-employees.	nformation and does not cover a	all documentation that ma	ay be required for payments
Last or Family Name	First or Given Name	Middle Initial	Date of Birth
Street Address		Telephone Number	Country of Legal Residency
City	State or Province	Zip or Postal Code	Country of Mailing Address
II. RESIDENCY STATUS	- For Tax Purposes Only		
1 I AM A UNITED STATES C	TIZEN I hereby certify that I am a citiz	en of the United States of Ame	rica.
permanently in the United S judicially determined to have	<u>DENT</u> I hereby certify that I have been tates as an immigrant, and that this stat be been abandoned. Attach a W-9 Form if only being reimbursed for expense	tus has not been revoked, and if receiving income other than e	has not been administratively or
cause I have met the Subst	X PURPOSES I hereby certify that I an antial Presence Test for residency. Atta e other than expense reimbursement. D	ach a copy of your Admissior	n Stamp or I-94 verification. Attach a
	DR TAX PURPOSES I DO NOT meet nission Stamp or I-94 verification.	the requirements for residency	in the United States of America.
III. ADMISSION CLASS	IFICATION Please indicate the c which you are currer	classification with which you will htly in the US.	l enter the United States or with
If you checked e	ither box 1 or 2 in the residency s	section above, do not com	plete this section.
B-2 or WT (visa waiver tourist classification)	Entering the U.S. on this admission cl expense reimbursements to you, unle without an Admission Stamp must check this desig	ess each requirement in Part IV	m making any payments or is satisfied. (Canadian and Mexican residents
B-1 or WB (visa waiver business classification)	Entering the U.S. on this admission cl than the reimbursement of actual trave		
F-1 Student	H-1B		
J-1 Exchange Visitor	Other - please specify:	:	
→ IV. PAYMENTS TO B-1/W	B and B-2/WT ADMISSIO	N CLASSES	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Acknowledgement of individuals on Check those that apply:	a B-1, B-2, WB, WT visa status or those	e who are exempt from visa req	uirements.
The honorarium payment an	d/or expense reimbursement will relate	to an academic activity.	
	not accepted an honorarium or expens stitutions within the United States of Arr		an four other institutions of higher
My activity at The Pennsylva	nia State University or another institutio	on in the United States will be fo	or 9 days or less.
(Exemption from Withholding fo	treaty exemption from U.S. Federal r Compensation of Independent F t be completed EACH time you wisl	Personal Services of a Nor	n Resident Individual). These
I hereby certify, under penalties c	f perjury, that all of the above inform	mation is true and correct.	
Signature		Date	

SPECIAL NOTE: A Social Security Number is required only for income payments, but is NOT required for expense reimbursement. When required for payments, <u>Non-Residents for tax purposes</u> should supply their Social Security Number or Individual Tax Identification Number directly to their host department.

PennState

Non-Employee Information Form

Purpose	The purpose of this document is to allow the Pennsylvania State University to collect the necessary information to smoothly and efficiently handle the details of your visit to our institution and to authorize payments to be made to you or on your behalf. Please return the completed form to your host as soon as possible.
I. General	Personal data requested in the first section of this document (name, address, etc.) will be used in the preparation of various University forms as they pertain to your visit. In most cases, any eligible payments to be made to you will be based on this information.
	Please note that there are two fields requesting country. The block labeled as "Country" is for your mailing address. The block labeled "Country of Residence" is the country which is your tax home.
II. Residency Status	This section is used by the University to establish (by your declaration), the determnation of your tax residency. An alien will not be considered a United States Resident for Tax Purposes unless the individual is:
	 A. a lawful permanent resident of the United States at any time during the calendar year, OR B. able to meet the Substantial Presence Test as specified by the Internal Revenue Service regulations.
	Only those individuals who can claim to be Non-Resident for tax purposes can claim treaty benefits for exemption from U.S. Federal income taxes. If you wish to find out whether you qualify for treaty benefits, have your host contact Accounting Operations at Penn State University.
III. Admission Classification	This section is to notify Penn State as to which admission classification you intend to use to enter the United States. For those visitors who are from countries that participate in the Visa Waiver program, please note that Penn State can only reimburse actual expenses for those that enter under the "business" classification, unless you satisfy the federal law requirements listed in Part IV of this form. Business classification is noted as a "WB" on the admission stamp in your passport upon entry to the United States. If you are unsure as to the type of classification you should attempt to obtain, contact your host at The Pennsylvania State University
IV. Payments to B-1/WB and B-2/WT Admission Classes	The American Competitiveness Workforce Act allows payment of honoraria or incidental expenses to B-1, B-2, WB, and WT admission classes for "usual academic activity," if paid by a United States institution of higher education, a nonprofit, or a governmental research organization. Under the Act, an academic activity may not exceed nine days at a single institution. In addition, such admission classes cannot accept honoraria and/or incidental expenses from more than five institutions or organizations in the previous six month period. Instead of B-1/B-2 status (not eligible to obtain US Social Security Number), Short-term Scholar status should be used by all visitors expecting payment (other than expenses) if the visitor does not already have a Social Security or Tax Payer Identification Number.
Affirmation:	Your signature on this document represents that the information you have provided is both true and accurate. It also signifies that you understand it is your responsibility to enter the U.S. on this trip with the appropriate admission class, so that Penn State can honor the commitments made to you by your host.
	If you have any questions regarding this document, contact your host as soon as possible in order to expedite the preparations needed for your upcoming visit.
HOST'S NAME_ ADDRESS	
PHONE NUMBE	ER
FAX NUMBER	
INTERNET ADI	DRESS