



ALIEN PAYMENT INFORMATION FORM

Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
	First	Middle	Last
U.S. Social Security # or ITIN	<input type="text"/>		
Permanent Legal Address: (foreign address if applicable)	<input type="text"/>		
	<input type="text"/>		
	Country <input type="text"/>	Postal	<input type="text"/>
CLASSIFICATION	<input type="checkbox"/>	RESIDENT ALIEN, CARD NUMBER	<input type="text"/>
	<input type="checkbox"/>	NON RESIDENT ALIEN, U.S. VISA NUMBER	<input type="text"/>
	VISA TYPE	<input type="text"/>	
	COUNTRY ISSUING PASSPORT	<input type="text"/>	
	PASSPORT NUMBER:	<input type="text"/>	
REASON FOR PAYMENT:	<input type="text"/>		
LOCATION where services are performed			
	<input type="checkbox"/>	WITHIN THE U.S. City <input type="text"/>	State <input type="text"/>
	<input type="checkbox"/>	OUTSIDE OF THE U.S.	<input type="text"/>

I declare under penalties of perjury that this statement has been examined by me and to the best of my knowledge and belief is accurate and complete.

Signature of Payee (or Authorized Signer)

Date:

Payments to Non-Resident Aliens for services performed within the U.S. are subject to a 30% withholding tax. The income and taxes withheld will be reported on form 1042S.

Additional forms may be required, please go to http://finance.tufts.edu/accpay/poli_payalien_reqforms.php for more information.