



University of Alaska Taxable Status Determination Form

PRIZES AND AWARDS

Date: MM / DD / YYYY

Section A: General Information. To be completed by all. Please print clearly.

Name: (Last, First, MI)

Check one and provide ID#: U.S. SSN: U.S. ITIN:

UA ID# (if applicable):

Gender: Male Female Birthdate: / /

Mailing Address:

Daytime Phone Number:

Evening Phone Number:

E-mail:

YOU MUST ANSWER THIS QUESTION:

Are you a U.S. Citizen or Permanent Resident? Yes, skip to section C. No, complete rest of form.

Section B: Tax Residency Information. Please print clearly. This information will be used to determine tax residency status.

You may be subject to tax withholding up to 30% on any payments or benefits you may receive.

Citizenship: Citizen of Nation of Birth:

What country did you live in prior to coming to the U.S.? Dates of residence? to

Form with fields for Date of First Entry into the U.S., Current I-94 Expiration, Passport #, U.S. Visa Type, and Expiration Date.

In the table below, please list your travel to the United States and travel dates for the last seven years through the present, including your current visit. Attach additional pages if necessary.

Check box if you have been in the U.S. as Visa category F, J, M, L, or Q prior to 7 years ago and complete travel information.

Table with columns: Arrival Date, Departure Date, Visa Type, Purpose of presence in U.S., and UA Staff Use Only (Exempt from SPT?, SPT Calculation).

Section C: Certification. To be completed by all. I certify that the above information is true and correct to the best of my knowledge.

Signature Date

Sponsoring Department Contact Name Fax Number: Phone Number:

Form with fields for Description of prize, Event name, and Cash value of prize.