THE UNIVERSITY OF CHICAGO UPP 192 ALIEN DETERMINATION OF RESIDENCY

All applicable questions must be answered. Attach copies of documents listed on the back of this form. This form and documents must be returned to Payroll Services (6054 S. Drexel, Suite 300) before any payment will be issued.

FOR PAYROLL	USE ONLY		
Visa:	FICA: Y N		
Entr:	Start:		
Ехр:	Resident		
Ctry:			
Entered by:			

SECTION I. PAYEE INFORMATION							
Name (Last, First)		Email		SSN or ITIN			
Country of Citizenship		Country of Residence (Do not indicate US)		Department (of employment)	Department (of ampleument)		
county of childramp		Country of Residence (Do not indicate US)		Department (of employment)			
Passport Issued by (Country) and H	Passport Number	Visa Number (not control number))	UC Student ID (If Applicable)			
SECTION II. CURRENT ALIEN STATUS							
Change of Status to	Permanent Resident	F1 Student on "Practical Training" (OPT or CPT)		/ee			
Permanent Residen	nt Applicant	J1 Student			J2 Spouse/Dependent of a J1 Non-Student		
B1, WB, WT (Busi	B1, WB, WT (Business)		J1 Student on "Academic Training"		J2 Spouse/Dependent of a J1 Student		
F1 Student		J1 Non-Student (Res Professor, Short-Ter		ar, Other USCIS Classification:			
SEC	TION III IMN	MIGRATION INF	FORMATION (Par	rmanont Rosidonts skin to Sool	ion IV)		
		of days of physical preser					
	List Calendar	Number of days of	Periods (dates of	Visa/USCIS	Were tax treaty		
	Year	physical presence	physical presence	classification	benefits taken?		
EXAMPLE Current Year	2015	350	01/15/15 12/31/15	J1 Student	NO		
Last Calendar Year							
2 Years Ago							
3 Years Ago							
4 Years Ago							
5 Years Ago							
6 Years Ago							
Date of first entry into the US (not	as a tourist) USC entry	SIS visa classification held during fir y	Expiration date of current classification	USCIS Anticipated da	te of departure from the US		
SECTION IV. CERTIFICATION AND SIGNATURE							
I certify that to the best of my knowledge all of the information provided above is true, correct and complete.							
Signature		Date (MM/DD/YY)					

SECTION V. I	DETERMIN.	ATION OF RESIDENT STATUS FOR TAX WITHHOLDING				
TEST I	A. F1 or J1 STUDENTS: Were you present in the US as a student, trainee or teacher during					
	any part of the fi	e (or fewer) calendar years, but not more than 5 total calendar years?				
Exempt from		nt of STUDENT: Are you the dependent of a J1 STUDENT described				
Substantial Presence Test	in Question A at		-			
Presence Test		UDENT: Within the period of the previous 6 calendar years, were you				
(F or J		bsent from the US or present in the US as a student, trainee or teacher				
Classification)	for only 1 calend	t of NON-STUDENT: Are you the dependent of a J1 NON-STUDENT				
	described in Question C above?					
If you answered YES'	-	e questions, you are considered a NON RESIDENT Alien for tax purposes. Check the NONRESIDEN				
	VI. If you answered NO to any questions above OR they do not apply to you, continue to Test 2.					
		Calculate the number of days of physical presence in the US				
TEST 2		List Calendar Year Number of days of Computation for Test				
Carls at a m that		physical presence				
Substantial Presence Test		F)				
Flesence Test	Current Year	X 1 =				
(For Current Year - include	Last Year	X 1/3 =				
estimated days of presence for entire calendar year)	2 Years Ago	X 1/6 = TOTAL				
			10			
		al to 183, you are a RESIDENT Alien for tax purposes. Check the RESIDENT for tax box. If NRESIDENT Alien for tax purposes. Check the NONRESIDENT for tax box.	Î			
		RESIDENCE STATEMENT FOR TAX PURPOSES				
	ECHON VI.	NESIDENCE STATEMENT FUN TAA FUNFUSES				
Resident Alie	en for Tax Purposes	Nonresident for Tax Purposes				
(Must comple	ete W9)	(Scholarship/fellowship recipients must complete W-8BEN)				
		(Independent contractor/honorarium recipients must complete W-8BEN)				
USCIS Visa Classification		Required documents to attach to this form. Signature is required on I 20, DS 2019 and Social Security Card. If employed, individuals <u>MUST HAVE</u> a Social Security Number or a receipt				
		a Social Security Number has been applied for. (Independent contractors are not required to	ρι			
		have an SSN, ITIN or receipt.)				
Change of Status to Permanent		If Employed: I-9 Re-certification (Section III) and copy of supporting I9 documentation				
Resident		If receiving Scholarship: Signed and dated UPP-192 only				
Permanent Resident Applicant		Unexpired Employment Authorization Card (EAD)				
F1 Student		I-20; I-94				
F1 Student on OPT		Employment Authorization Card (EAD)				
F1 Student on CPT		I-20 (indicating University of Chicago authorized CPT on page 2); I-94				
J1 Student		DS-2019; I-94				
J1 Non-Student		DS-2019; I-94				
J2 Dependent		Unexpired Employment Authorization Card (EAD)				
H-1B Worker		I-797 Notice of Action; I-94				
TN Professional		I-94 indicating "TN" status and "University of Chicago"; Picture Page of Passport				
B1, WB, WT Treaty Eligible Aliens:		I-94 or ESTA receipt; Picture page of passport -Form 8233 and Revenue Procedure Statement (Nonresident employees and independent				
-Must have SSN or receip		-Form 8233 and Revenue Procedure Statement (Nonresident employees and independent contractors)				
-Must have SSN of receipt if employed -Must have SSN or ITIN if receiving		-Form W9 and W9A (Resident employees)				
scholarship or independent contractor		-W-8BEN (Stipend recipients and post-doctoral fellows must have SSN or ITIN) & (Royalty				
payments		Recipients)				
SECTION VII. TO BE COMPLETED BY DEPARTMENT REPRESENTATIVE (Required)						
		Department Name:				
Email Address:		Phone Number:				