



The State University of New York

Nonresident Alien Participant Support Tax Exemption Certificate

Administrative and Award Information				
Last Name	First Name	Middle Initial	Social Security Number	Visa Type
Project	Task	Award	Expenditure Type	Organization
Exemption Information:				
I claim exemption from U.S. income tax withholding for the following reason:				
	I am receiving funds from a foreign source. <i>Initial of grants official or designate, indicating approval</i> Initial: _____ Date: _____			
	No exemptions applies - entire amount taxable			

I certify that the information I have provided is true and correct to the best of my knowledge.

Signature: _____ Date: _____

Upon completion, return this form to: _____