

Form 13614-NR (May 2023)		Department of the Treasury - Internal Revenue Service Nonresident Alien Intake and Interview Sheet				OMB Number 1545-1964			
Last or family name			First			Middle initial			
Visa #			Passport #						
Date of birth: (mm/dd/yyyy) ____ / ____ / ____		Telephone #		E-mail address					
Were you a U.S. citizen or resident alien the entire year? <input type="checkbox"/> Yes <input type="checkbox"/> No				Were you ever a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No					
U.S. local street address									
City			State		Zip code				
Foreign residence address									
Address line 2									
Foreign country			Province/County		Postal code				
Country of citizenship			Country that issued passport						
Are you married? <input type="checkbox"/> Yes <input type="checkbox"/> No If "YES", is your spouse in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No									
If "YES", is it recognized by the state where you will be filing? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Are you a									
U.S. National		Resident of Canada		Resident of Mexico		Resident of South Korea			
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Dependent Information									
First name	Last or family name	Date of birth (mm/dd/yyyy)	Relationship to you (son, daughter, none, etc.)	Number of months lived with you in the U.S. in 2023	U.S. citizen, U.S. resident alien, U.S. national, or a resident of Canada, Mexico, or South Korea	Did person file joint return?	Did person provide more than 50% of their own support?	Did you provide more than 50% of their support?	Did the person have Gross Income of \$4,700 or more?
What is the date you FIRST entered the United States? ____ / ____ / ____									
Entry Immigration Status - Check one									
<input type="checkbox"/> U.S. Immigrant/Permanent resident			<input type="checkbox"/> F-1 Student			<input type="checkbox"/> F-2 Spouse or child of student			
<input type="checkbox"/> H-1 Temporary employee			<input type="checkbox"/> *J-1 Exchange visitor			<input type="checkbox"/> J-2 Spouse or child of exchange visitor			
Other (list)									
Current Immigration Status - Check one									
<input type="checkbox"/> U.S. Immigrant/Permanent resident			<input type="checkbox"/> F-1 Student			<input type="checkbox"/> F-2 Spouse or child of student			
<input type="checkbox"/> H-1 Temporary employee			<input type="checkbox"/> *J-1 Exchange visitor			<input type="checkbox"/> J-2 Spouse or child of exchange visitor			
Other (list)									
Have you ever changed your visa type or U.S. immigration status? <input type="checkbox"/> Yes <input type="checkbox"/> No									
If "Yes", indicate the date and nature of the change. ____ / ____ / ____									
Enter the type of U.S. visa you held during these years									
2017	2018	2019	2020	2021	2022				
* If Immigration status is J-1, what is the subtype? Check one									
<input type="checkbox"/> 01 Student			<input type="checkbox"/> 05 Professor			<input type="checkbox"/> 12 Research scholar			
<input type="checkbox"/> 02 Short term scholar			Other (list)						
What is the actual primary activity of the visit? Check one									
<input type="checkbox"/> 01 Studying in a degree program			<input type="checkbox"/> 04 Lecturing		<input type="checkbox"/> 07 Conducting research		<input type="checkbox"/> 10 Clinical activities		
<input type="checkbox"/> 02 Studying in a non-degree program			<input type="checkbox"/> 05 Observing		<input type="checkbox"/> 08 Training		<input type="checkbox"/> 11 Temporary employment		
<input type="checkbox"/> 03 Teaching			<input type="checkbox"/> 06 Consulting		<input type="checkbox"/> 09 Demonstrating special skills		<input type="checkbox"/> 12 Here with spouse		

Catalog Number 39748B

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Check the years you were present in the United States as a teacher, trainee, student or as an accompanying spouse or dependent of a person in such status for any part of the year. ☐ 2017 ☐ 2018 ☐ 2019 ☐ 2020 ☐ 2021 ☐ 2022

Have you ever been present in the U.S. PRIOR to 2017 on a teacher, trainee, student visa, or as their accompanying spouse or dependent? ☐ Yes ☐ No If so, what years and visa type _____

How many days (including vacations, nonworkdays and partial days) were you present in the U.S. during

2021 _____ 2022 _____ 2023 _____

List the dates you entered and left the United States during 2023

Date entered United States mm/dd/yyyy	Date departed United States mm/dd/yyyy

Date entered United States mm/dd/yyyy	Date departed United States mm/dd/yyyy

Did you file a U.S. income tax return for any year before 2023? ☐ Yes ☐ No

If "Yes", give latest year ____ / ____ / ____ Form number filed _____

During 2023, did you apply to be a green card holder (lawful permanent resident) of the United States? ☐ Yes ☐ No

Do you have an application pending to change your status to lawful permanent resident? ☐ Yes ☐ No

1. Are you claiming the benefits of a U.S. income tax treaty with a foreign country? ☐ Yes ☐ No

If "Yes", enter the appropriate information in the columns below

(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year

2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? ☐ Yes ☐ No

Information about academic institution you attended in 2023

Name _____ Telephone number _____

Address _____

Name of your academic/specialized program director _____ Telephone number _____

Address _____

During 2023 did you receive

Did you have

Scholarships or fellowship grants	<input type="checkbox"/> Yes <input type="checkbox"/> No	Casualty losses in a declared disaster area	<input type="checkbox"/> Yes <input type="checkbox"/> No
Wages, salaries or tips	<input type="checkbox"/> Yes <input type="checkbox"/> No	Student loan interest paid	<input type="checkbox"/> Yes <input type="checkbox"/> No
Interest	<input type="checkbox"/> Yes <input type="checkbox"/> No	State or local income taxes	<input type="checkbox"/> Yes <input type="checkbox"/> No
Distributions from IRA, pension or annuity	<input type="checkbox"/> Yes <input type="checkbox"/> No	U.S. Charitable contributions	<input type="checkbox"/> Yes <input type="checkbox"/> No
State or local tax refunds	<input type="checkbox"/> Yes <input type="checkbox"/> No	Child/Dependent care expenses	<input type="checkbox"/> Yes <input type="checkbox"/> No
Unemployment compensation	<input type="checkbox"/> Yes <input type="checkbox"/> No	IRA contributions	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dividend income or capital gains or losses	<input type="checkbox"/> Yes <input type="checkbox"/> No	Any other income (gambling, lottery, prizes, awards, self-employment, rents, royalties, virtual currency, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you or any dependent have health insurance coverage through HealthCare.gov (The Marketplace)?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, was any Advanced Premium Tax Credit received? (Provide Form 1095-A)		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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The Privacy Act of 1974 requires that when we ask for information we tell you our legal right to ask for the information, why we are asking for it, and how it will be used. We must also tell you what could happen if we do not receive it, and whether your response is voluntary, required to obtain a benefit, or mandatory.

Our legal right to ask for information is 5 U.S.C. 301. We are asking for this information to assist us in contacting you relative to your interest and/or participation in the IRS volunteer income tax preparation and outreach programs. The information you provide may be furnished to others who coordinate activities and staffing at volunteer return preparation sites or outreach activities. The information may also be used to establish effective controls, send correspondence and recognize volunteers. Your response is voluntary. However, if you do not provide the requested information, the IRS may not be able to use your assistance in these programs.

The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this study is 1545-2075. Also, if you have any comments regarding the time estimates associated with this study or suggestion on making this process simpler, please write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, Washington, DC 20224.