

ILLINOIS STATE UNIVERSITY RESEARCH PARTICIPANT RECEIPT FORM

FOR PAYMENTS OF \$25.01 TO \$99.99

Illinois State University must both maintain confidentiality of research participants and comply with Internal Revenue Service and funding agency reporting requirements. The information contained in this form will be used to document the compensation you receive for participating in this study but will be kept secure and completely separate from any information you provide as part of the research study. This form must be completed to receive compensation, but you have the option to participate in the study without receiving compensation.

Are you a current student or employee at Illinois State University?

[ ] YES Provide your University Login ID (ULID): \_\_\_\_\_

Participation in the study is not within the scope of your employment with Illinois State University and will not be reported on your W-2 Wage and Tax Statement. See additional tax information below.

[ ] NO Provide your contact information:

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

I have received or am requesting compensation in the form and amount indicated below:

Form of Payment: [ ] Check [ ] Gift Card [ ] Property/Other (describe below):

Amount/Value: \$ \_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TAX INFORMATION:

US Citizens and resident aliens: a 1099-MISC form will be submitted to the IRS if all payments received from ISU in a calendar year are \$600 or more.

Nonresident aliens: a 1042-S form will be submitted to the IRS, regardless of the compensation amount. Non-resident aliens will be subject to 30% withholding unless exempted.

FOR ISU RESEARCH PERSONNEL:

Research participants may participate without receiving payment if they choose not to provide the information on this form

This form may only be handled by researchers listed on the protocol and ISU employees designated by the Comptroller's Office who have signed a confidentiality agreement and completed CITI Training.

IRB Protocol or Exemption Number \_\_\_\_\_