

Listing of Nonresidents Subject to IRS Notice 2005-76

Department: _____

Agency Number: _____

Contact Person: _____

Contact Number/Email: _____

Authorizing Signature*: _____

*Must be a person authorized to sign Employment History documents.

Social Security Number	Employee Name	Type of Change (Add or Delete)	Non-Citizen (Code B)

Note: Complete all columns that apply to the employee.

- No Changes
- Certify that the department listed above does not hire Nonresident Aliens Employees (Annual Certification)

Return via **ConnectHR**: In the drop-down menu, select, **Tax Support Unit – Nonresident Add or Delete**