

Foreign Person's U.S. Source Income Subject to Withholding

► Go to www.irs.gov/Form1042S for instructions and the latest information.

2022

OMB No. 1545-0096

Copy D for Recipient

Attach to any state tax return you file

0123456789 UNIQUE FORM IDENTIFIER ☐ AMENDED ☐ AMENDMENT NO.

1 Income code 20	2 Gross income 5000	3 Chapter indicator. Enter "3" or "4" 3	13e Recipient's U.S. TIN, if any XXX-XX-XXXX	13f Ch. 3 status code 02
3a Exemption code 04 4a Exemption code 3b Tax rate 0.0000 4b Tax rate .			13h Recipient's GIIN	13i Recipient's foreign tax identification number, if any 13j LOB code
5 Withholding allowance			13k Recipient's account number	
6 Net income 5000			13l Recipient's date of birth (YYYYMMDD) 2 0 0 1 0 4 1 5	
7a Federal tax withheld			14a Primary Withholding Agent's Name (if applicable)	
7b Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) <input type="checkbox"/>			14b Primary Withholding Agent's EIN	
7c Check if withholding occurred in subsequent year with respect to a partnership interest <input type="checkbox"/>			15 Check if pro-rata basis reporting <input type="checkbox"/>	
8 Tax withheld by other agents			15a Intermediary or flow-through entity's EIN, if any	15b Ch. 3 status code 15c Ch. 4 status code
9 Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) ()			15d Intermediary or flow-through entity's name	
10 Total withholding credit (combine boxes 7a, 8, and 9)			15e Intermediary or flow-through entity's GIIN	
11 Tax paid by withholding agent (amounts not withheld) (see instructions)			15f Country code	15g Foreign tax identification number, if any
12a Withholding agent's EIN XX-XXXXXXX	12b Ch. 3 status code 02	12c Ch. 4 status code	15h Address (number and street)	
12d Withholding agent's name IVY LEAGUE UNIVERSITY			15i City or town, state or province, country, ZIP or foreign postal code	
12e Withholding agent's Global Intermediary Identification Number (GIIN)			16a Payer's name	
12f Country code	12g Foreign tax identification number, if any		16b Payer's TIN	
12h Address (number and street) 221 WHITNEY AVENUE			16c Payer's GIIN	16d Ch. 3 status code 16e Ch. 4 status code
12i City or town, state or province, country, ZIP or foreign postal code YOUR TOWN, YS XXXXX			17a State income tax withheld 0	17b Payer's state tax no. 17c Name of state
13a Recipient's name SIMONE DUPONT			13b Recipient's country code	
13c Address (number and street) 250 CHURCH STREET				
13d City or town, state or province, country, ZIP or foreign postal code YOUR TOWN, YS XXXXX				

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0123456789 UNIQUE FORM IDENTIFIER ☐ AMENDED ☐ AMENDMENT NO.

1 Income code 16	2 Gross income 14500	3 Chapter indicator. Enter "3" or "4" 3	13e Recipient's U.S. TIN, if any XXX-XX-XXXX	13f Ch. 3 status code 02
		3a Exemption code 04	4a Exemption code	13g Ch. 4 status code
		3b Tax rate 0.0000	4b Tax rate .	13h Recipient's GIIN
				13i Recipient's foreign tax identification number, if any
				13j LOB code
5 Withholding allowance				
6 Net income 14500				
7a Federal tax withheld				
7b Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) <input type="checkbox"/>				
7c Check if withholding occurred in subsequent year with respect to a partnership interest <input type="checkbox"/>				
8 Tax withheld by other agents				
9 Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) ()				
10 Total withholding credit (combine boxes 7a, 8, and 9)				
11 Tax paid by withholding agent (amounts not withheld) (see instructions)				
12a Withholding agent's EIN XX-XXXXXXX		12b Ch. 3 status code 02	12c Ch. 4 status code	
12d Withholding agent's name IVY LEAGUE UNIVERSITY				
12e Withholding agent's Global Intermediary Identification Number (GIIN)				
12f Country code		12g Foreign tax identification number, if any		
12h Address (number and street) 221 WHITNEY AVENUE				
12i City or town, state or province, country, ZIP or foreign postal code YOUR TOWN, YS XXXXX				
13a Recipient's name SIMONE DUPONT		13b Recipient's country code		
13c Address (number and street) 250 CHURCH STREET				
13d City or town, state or province, country, ZIP or foreign postal code YOUR TOWN, YS XXXXX				
13e Recipient's U.S. TIN, if any XXX-XX-XXXX				
13f Ch. 3 status code 02				
13g Ch. 4 status code				
13h Recipient's GIIN				
13i Recipient's foreign tax identification number, if any				
13j LOB code				
13k Recipient's account number				
13l Recipient's date of birth (YYYYMMDD) 20010415				
14a Primary Withholding Agent's Name (if applicable)				
14b Primary Withholding Agent's EIN				
15 Check if pro-rata basis reporting <input type="checkbox"/>				
15a Intermediary or flow-through entity's EIN, if any				
15b Ch. 3 status code				
15c Ch. 4 status code				
15d Intermediary or flow-through entity's name				
15e Intermediary or flow-through entity's GIIN				
15f Country code				
15g Foreign tax identification number, if any				
15h Address (number and street)				
15i City or town, state or province, country, ZIP or foreign postal code				
16a Payer's name				
16b Payer's TIN				
16c Payer's GIIN				
16d Ch. 3 status code				
16e Ch. 4 status code				
17a State income tax withheld 0				
17b Payer's state tax no.				
17c Name of state				