

REQUEST FOR CORRECTION 1099 OR 1042-S TAX STATEMENT

CALENDAR RE	EPORTING YEAR:					
FORM				1042-S		
NAME REPOR	TED ON TAX STATEMENT	:				
LAST 4 DIGITS	OF TAX IDENTIFICATION	NUMBER (TIN)):			
IF 1099- BOX INCOME REPORTED:(Box 1 – Rent, Box 2 – Royalty, Box 3 – Participant Support, 1099 NEC Box 1 – Independent Contractor)						
(16-Fellowship, 1	COME CODE REPORTED:_ 9 – Employee Teacher Reseal oyalty Copyright, 23 - Participa	rcher, 20 - Employ	vee Student, 17	 Independent Contractor, 10 	- Royalty	
	ORTED ON ORIGINAL					
AMOUNT CHA	CHANGE DECREASE			INCREASE		
CORRECTED A	AMOUNT TO REPORT:					
	ILING ADDRESS:					
City		State		Zip		
CAMPUS LOCA	ATION AND REQUESTOR:					
The correct	ted form is requested	d for the foll	owing reas	son:		
Sy Ta	stem coding error x Identification Number inco	rrect		_Funds returned _Other		
Details						
FOR CENTRAL	OFICE USE ONLY:					
Tax Statement	corrected on:/		_ Mailed on: _			
Processed By:_						
	Со	RRECTION		ORIGINAL (Form never created)		