

CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number Lake Erie College of Osteopathic Medicin 1858 West Grandview Blvd Erie PA 16509 (814) 860-5173	1 Payments received for qualified tuition and related expenses \$ 21,262.00	OMB No. 1545-1574 2022 Form 1098-T
	2	

Tuition Statement

FILER'S employer identification no. 251698677	STUDENT'S TIN XXX-XX-6917	3
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Copy B For Student

STUDENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code Oviya Shivani Mohanraj 10551 Cherry Grove Ct Wexford, PA 15090	4 Adjustments made for a prior year \$	5 Scholarships or grants \$
	6 Adjustments to scholarships or grants for a prior year \$	7 Checked if the amount in box 1 includes amounts for an academic period beginning January-March 2023 <input type="checkbox"/>

This is important tax information and is being furnished to the IRS. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.

Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student <input checked="" type="checkbox"/>	9 Checked if a graduate student <input checked="" type="checkbox"/>	10 Ins. contract reimb./refund \$
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