

Form **1042-S**

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

2023

OMB No. 1545-0096

Department of the Treasury
Internal Revenue Service

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

Copy B
for Recipient

0000001323		UNIQUE FORM IDENTIFIER		AMENDED	AMENDMENT NO
1 Income code 29	2 Gross income 337	3 Chapter indicator Enter "3" or "4" 3	3a Exemption code (02)	4a Exemption code 15	13e Recipient's U.S. TIN, if any XXX-XX-5643
5 Withholding allowance		3b Tax rate 00.00	4b Tax rate 00.00	13h Recipient's GIIN	13f Ch. 3 status code 16
6 Net income				13i Recipient's foreign tax identification number, if any	13g Ch. 4 status code 23
7a Federal tax withheld -0-				13k Recipient's account number 03478925497	13j LOB code
7b Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) <input type="checkbox"/>				13l Recipient's date of birth (YYYYMMDD) 19910519	
7c Check if withholding occurred in subsequent year with respect to a partnership interest <input type="checkbox"/>				14a Primary Withholding Agent's Name (if applicable)	
8 Tax withheld by other agents				14b Primary Withholding Agent's EIN	15 Check if pro-rata basis reporting <input type="checkbox"/>
9 Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) ()				15a Intermediary or flow-through entity's EIN, if any	15b Ch. 3 status code
10 Total withholding credit (combine boxes 7a, 8, and 9)				15c Ch. 4 status code	
11 Tax paid by withholding agent (amounts not withheld) (see instructions)				15d Intermediary or flow-through entity's name	
12a Withholding agent's EIN 30-0537225	12b Ch. 3 status code 15	12c Ch. 4 status code 01		15e Intermediary or flow-through entity's GIIN	
12d Withholding agent's name THE HUNTINGTON NATIONAL BANK		12e Withholding agent's Global Intermediary Identification Number (GIIN) 800-480-2265		15f Country code	15g Foreign tax identification number, if any
12f Country code US	12g Foreign tax identification number, if any		15h Address (number and street)		
12h Address (number and street) P.O. BOX 1558 GW4W52				15i City or town, state or province, country, ZIP or foreign postal code	
12i City or town, state or province, country, ZIP or foreign postal code COLUMBUS, OH 43216				16a Payer's name	16b Payer's TIN
13a Recipient's name ISHA MUTHREJA		13b Recipient's country code IN		16c Payer's GIIN	16d Ch. 3 status code
13c Address (number and street) 5937 GULLIVER LN				16e Ch. 4 status code	
13d City or town, state or province, country, ZIP or foreign postal code TOLEDO, OH 43615-5005				17a State income tax withheld	17b Payer's state tax no.
				17c Name of state	

(keep for your records)

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RECIPIENT'S ACCOUNT #: 03478925497

* THE FORM IS BEING FURNISHED TO THE UNITED STATES INTERNAL REVENUE SERVICE.

