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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](http://www.irs.gov/Form1042S) for instructions and the latest information.

<b>1</b> Income code 28	<b>2</b> Gross income \$ 3,053.44	<b>3</b> Chapter indicator. Enter "3" or "4" 0 0 0 3 4 3 5 9 5 3	<b>3a</b> Exemption code 00	<b>3b</b> Tax rate 30.00	<b>3c</b> UNIQUE FORM IDENTIFIER	<b>3d</b> AMENDED <input type="checkbox"/>	<b>3e</b> AMENDMENT NO.	<b>13f</b> Ch. 3 status code	<b>13g</b> Ch. 4 status code
<b>5</b> Withholding allowance	<b>6</b> Net income	<b>7a</b> Federal tax withheld \$ 916.03	<b>7b</b> Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) <input type="checkbox"/>	<b>7c</b> Check if withholding occurred in subsequent year with respect to a partnership interest <input type="checkbox"/>	<b>8</b> Tax withheld by other agents	<b>9</b> Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) 0.00	<b>10</b> Total withholding credit (combine boxes 7a, 8, and 9) 0.00	<b>11</b> Tax paid by withholding agent (amounts not withheld) (see instructions) \$ 916.03	<b>12a</b> Withholding agent's EIN 731375001
<b>12b</b> Ch. 3 status 02	<b>12c</b> Ch. 4 status	<b>12d</b> Withholding agent's name CHICKASAW NATION DEPARTMENT OF COMMERCE	<b>12e</b> Withholding agent's Global Intermediary Identification Number (GIIN)	<b>12f</b> Country code US	<b>12g</b> Foreign tax identification number, if any	<b>12h</b> Address (number and street) 2020 LONNIE ABBOT BLVD	<b>12i</b> City or town, state or province, country, ZIP or foreign postal code ADA, OK, 7820	<b>13a</b> Recipient's name LEWIS EDBERG CLEMENT CHRISTOPHER PASCA MA	<b>13b</b> Recipient's country code IN
<b>13c</b> Address (number and street) 425 BERNARD STREET APT 814	<b>13d</b> City or town, state or province, country, ZIP or foreign postal code DENTON, TX US 76201	<b>13e</b> Recipient's U.S. TIN, if any	<b>13f</b> Recipient's GIIN	<b>13g</b> Recipient's foreign tax identification number, if any	<b>13h</b> Recipient's account number Y13930372 - 4119000	<b>13i</b> Recipient's date of birth (YYYYMMDD) 19970315	<b>14a</b> Primary Withholding Agent's Name (if applicable)	<b>14b</b> Primary Withholding Agent's EIN	<b>15</b> Check if pro-rata basis reporting <input type="checkbox"/>
<b>16a</b> Payer's name	<b>16b</b> Payer's TIN	<b>16c</b> Payer's GIIN	<b>16d</b> Ch. 3 status	<b>16e</b> Ch. 4 status	<b>17a</b> State income tax withheld \$ 244.28	<b>17b</b> Payer's state tax no. 731375001	<b>17c</b> Name of state OK	<b>15a</b> Intermediary or flow-through entity's EIN, if any	<b>15b</b> Ch. 3 status
<b>15c</b> Ch. 4 status	<b>15d</b> Intermediary or flow-through entity's name	<b>15e</b> Intermediary or flow-through entity's GIIN	<b>15f</b> Country code	<b>15g</b> Foreign tax identification number, if any	<b>15h</b> Address (number and street)	<b>15i</b> City or town, state or province, country, ZIP or foreign postal code	<b>15j</b> Signature	<b>15k</b> Date	<b>15l</b> Other

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Date 04/27/2023

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Form **1042-S**

Department of the Treasury  
Internal Revenue Service

**Foreign Person's U.S. Source Income Subject to Withholding**  
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**2022**

OMB No. 1545-0096

<b>1</b> Income code 28		<b>2</b> Gross income \$ 3,750.00		<b>3</b> Chapter indicator. Enter "3" or "4" 0003122739		<b>UNIQUE FORM IDENTIFIER</b> <input type="checkbox"/> AMENDED <input type="checkbox"/> AMENDMENT NO.	
<b>5</b> Withholding allowance		<b>3a</b> Exemption code 00		<b>4a</b> Exemption code 00		<b>13e</b> Recipient's U.S. TIN, if any	
<b>6</b> Net income		<b>3b</b> Tax rate 30.00		<b>4b</b> Tax rate 30.00		<b>13f</b> Ch. 3 status code	
<b>7a</b> Federal tax withheld \$ 1,125.00		<b>7b</b> Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) <input type="checkbox"/>		<b>7c</b> Check if withholding occurred in subsequent year with respect to a partnership interest <input type="checkbox"/>		<b>13g</b> Ch. 4 status code	
<b>8</b> Tax withheld by other agents 0.00		<b>9</b> Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) 0.00		<b>10</b> Total withholding credit (combine boxes 7a, 8, and 9) \$ 1,125.00		<b>13h</b> Recipient's GIIN	
<b>11</b> Tax paid by withholding agent (amounts not withheld) (see instructions)		<b>12a</b> Withholding agent's EIN 731375001		<b>12b</b> Ch. 3 status 02		<b>13i</b> Recipient's foreign tax identification number, if any	
<b>12d</b> Withholding agent's name CHICKASAW NATION DEPARTMENT OF COMMERCE		<b>12c</b> Ch. 4 status		<b>12e</b> Withholding agent's Global Intermediary Identification Number (GIIN)		<b>13j</b> LOB code	
<b>12f</b> Country code US		<b>12g</b> Foreign tax identification number, if any		<b>12h</b> Address (number and street) 2020 LONNIE ABBOT BLVD ADA, OK, 7820		<b>13k</b> Recipient's account number Y13930372 - 3795970	
<b>12i</b> City or town, state or province, country, ZIP or foreign postal code		<b>12j</b> City or town, state or province, country, ZIP or foreign postal code		<b>12k</b> City or town, state or province, country, ZIP or foreign postal code		<b>13l</b> Recipient's date of birth (YYYYMMDD) 19970315	
<b>13a</b> Recipient's name LEWIS EDBERG CLEMENT		<b>13b</b> Recipient's country code IN		<b>13c</b> Address (number and street) 425 BERNARD ST DENTON, TX US 76201		<b>14a</b> Primary Withholding Agent's Name (if applicable)	
<b>17a</b> State income tax withheld \$ 300.00		<b>17b</b> Payer's state tax no. 731375001		<b>17c</b> Name of state OK		<b>14b</b> Primary Withholding Agent's EIN	
<b>15a</b> Intermediary or flow-through entity's EIN, if any		<b>15b</b> Ch. 3 status		<b>15c</b> Ch. 4 status		<b>15</b> Check if pro-rata basis reporting <input type="checkbox"/>	
<b>15d</b> Intermediary or flow-through entity's name		<b>15e</b> Intermediary or flow-through entity's GIIN		<b>15f</b> Country code		<b>15g</b> Foreign tax identification number, if any	
<b>15h</b> Address (number and street)		<b>15i</b> City or town, state or province, country, ZIP or foreign postal code		<b>16a</b> Payer's name		<b>16b</b> Payer's TIN	
<b>16c</b> Payer's GIIN		<b>16d</b> Ch. 3 status		<b>16e</b> Ch. 4 status		<b>Signature</b>	

Date: 11/12/2022