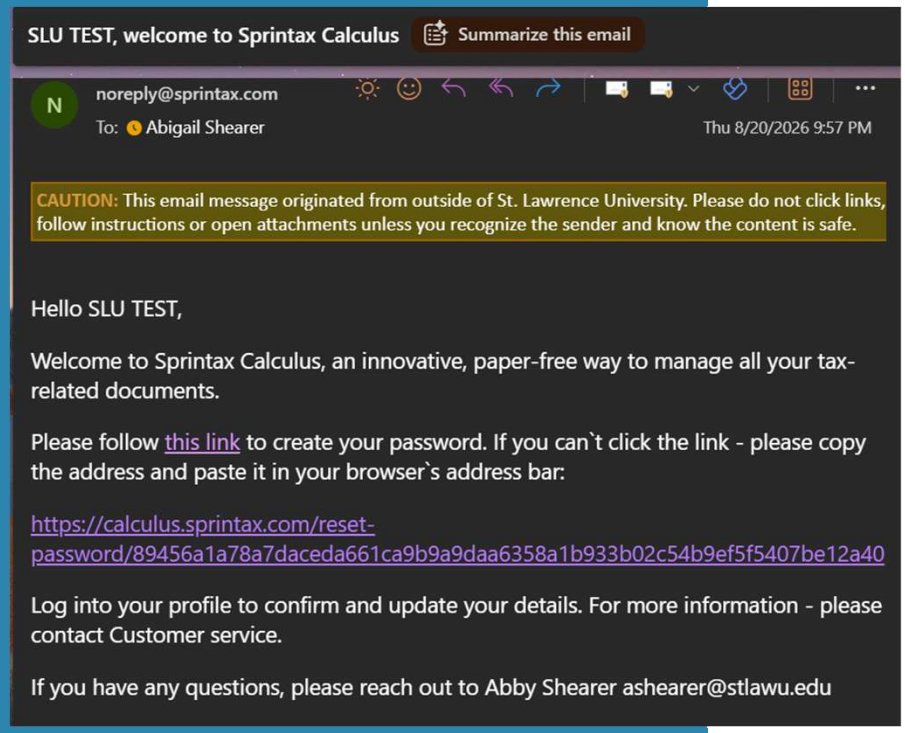
Sprintax Calculus: 1042-S Forms

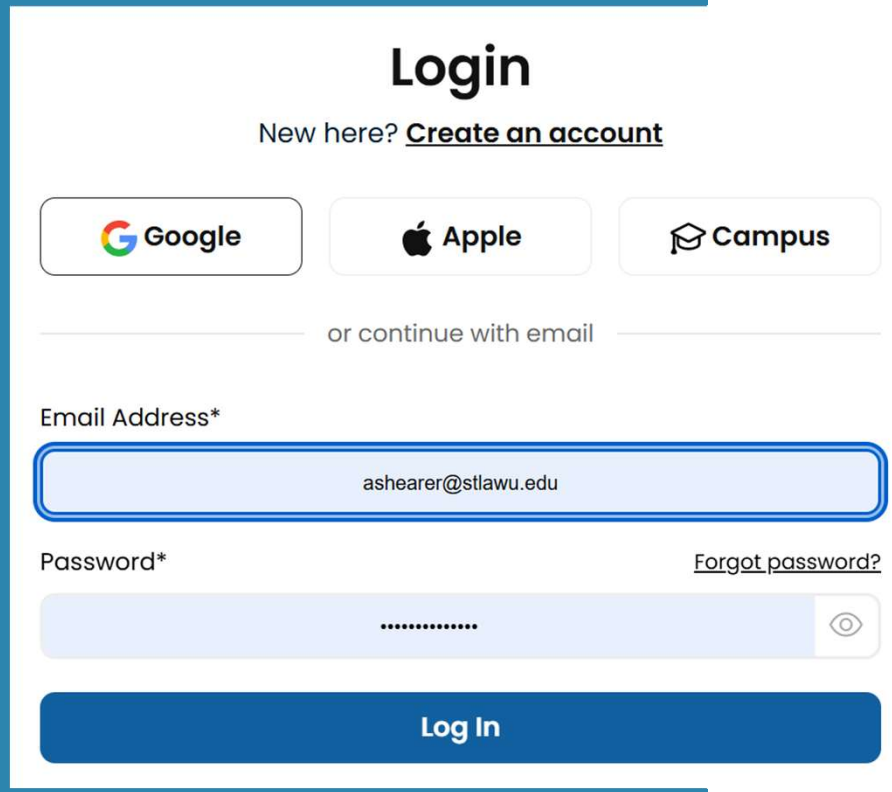
Account Activation &
Questionnaire Walkthrough





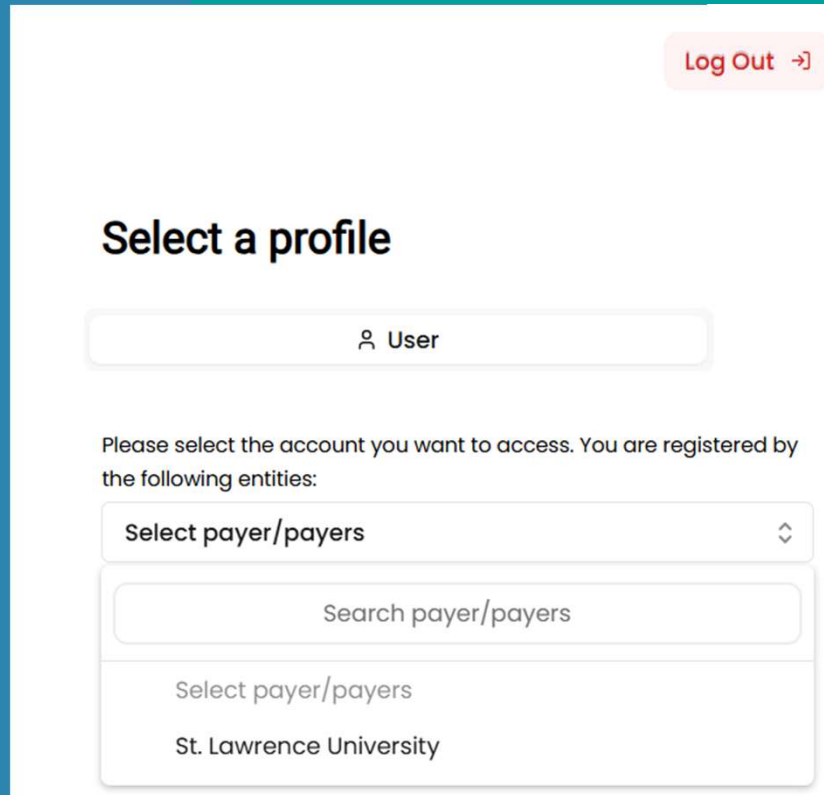
Activation Email

- Receive email from noreply@sprintax.com
- Follow the link or paste the URL in a browser to activate your account and change/reset your password



Login

- Upon password change/reset, you will need to log in with your newly created credentials (SLU email and password)



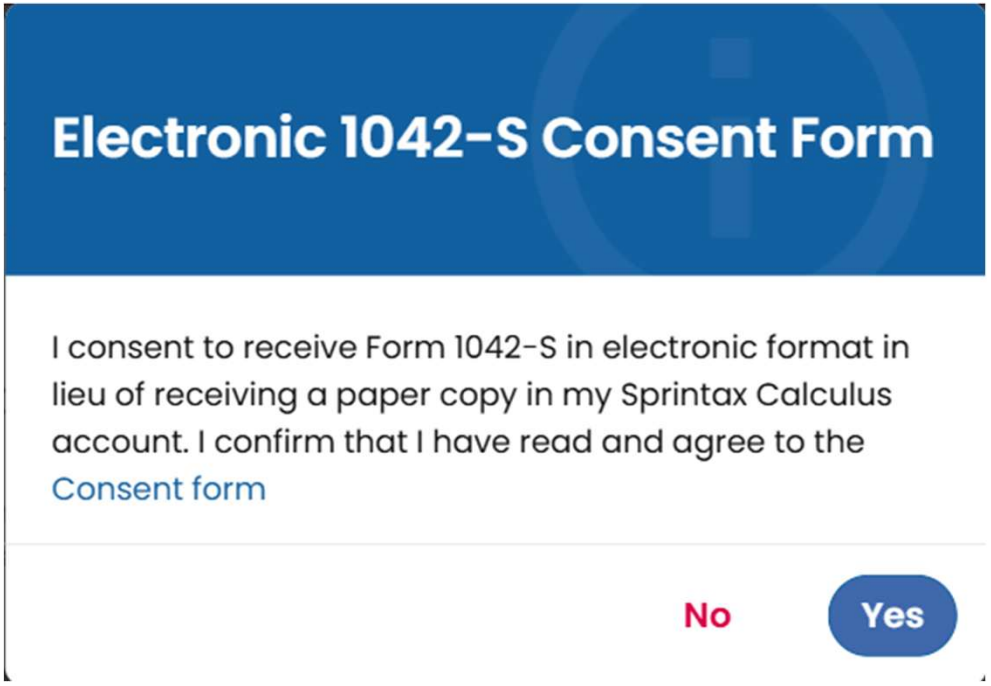
Select Payer

- You will need to select St. Lawrence University as the Payer when you log in

- If there is more than one option that pops up, please contact Abby Shearer ashearer@stlawu.edu

1042-S Form Electronic Consent

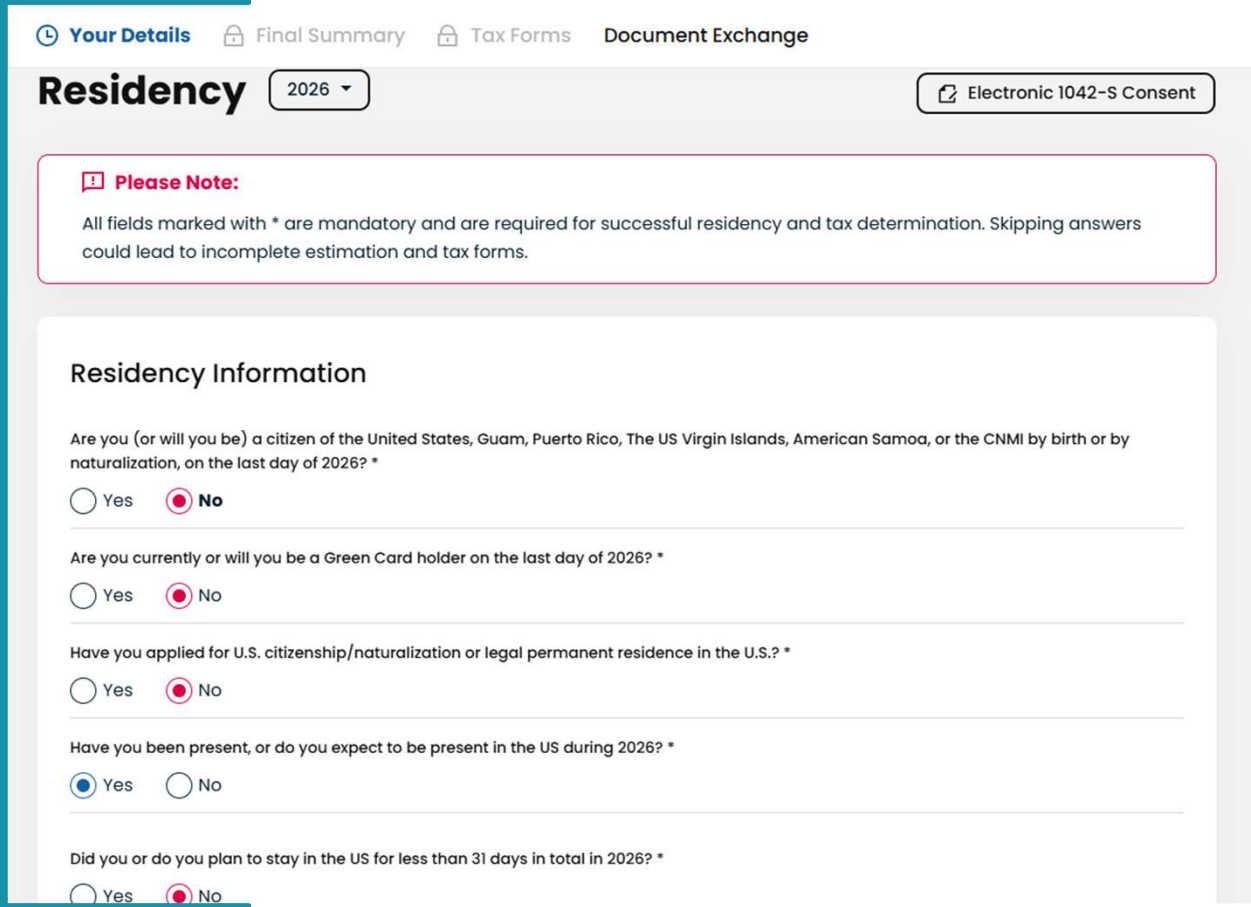
- Pop-up upon login if not previously consented to
- Most reliable way to receive your 1042-S form on time
- If you want a paper copy of your form, please ensure your contact information is correct

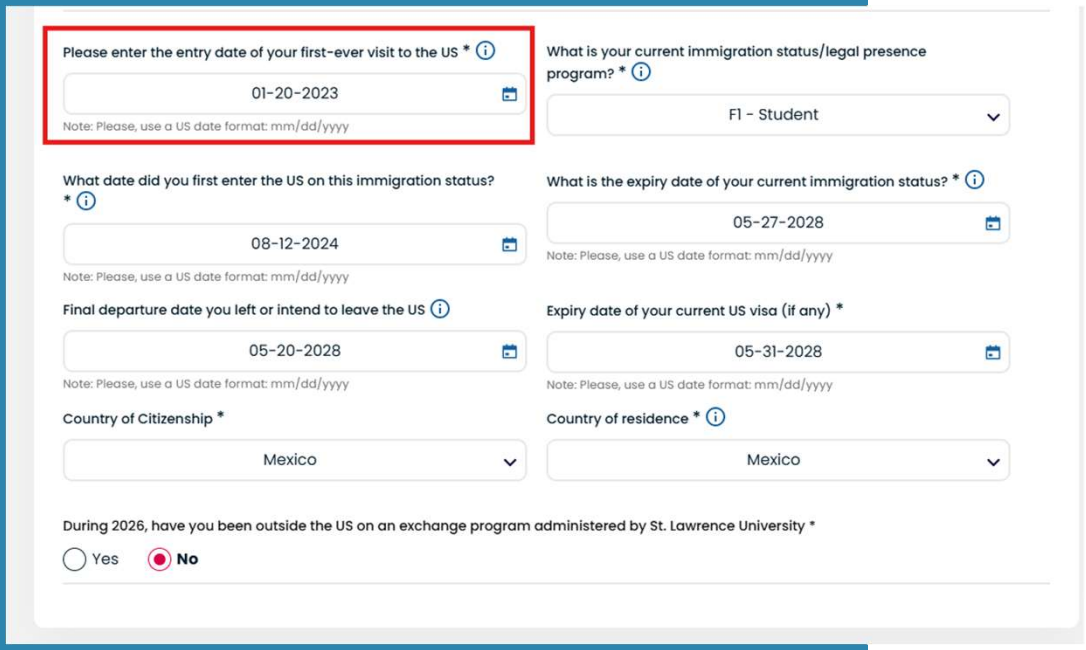


Residency

First section of the International Student Questionnaire

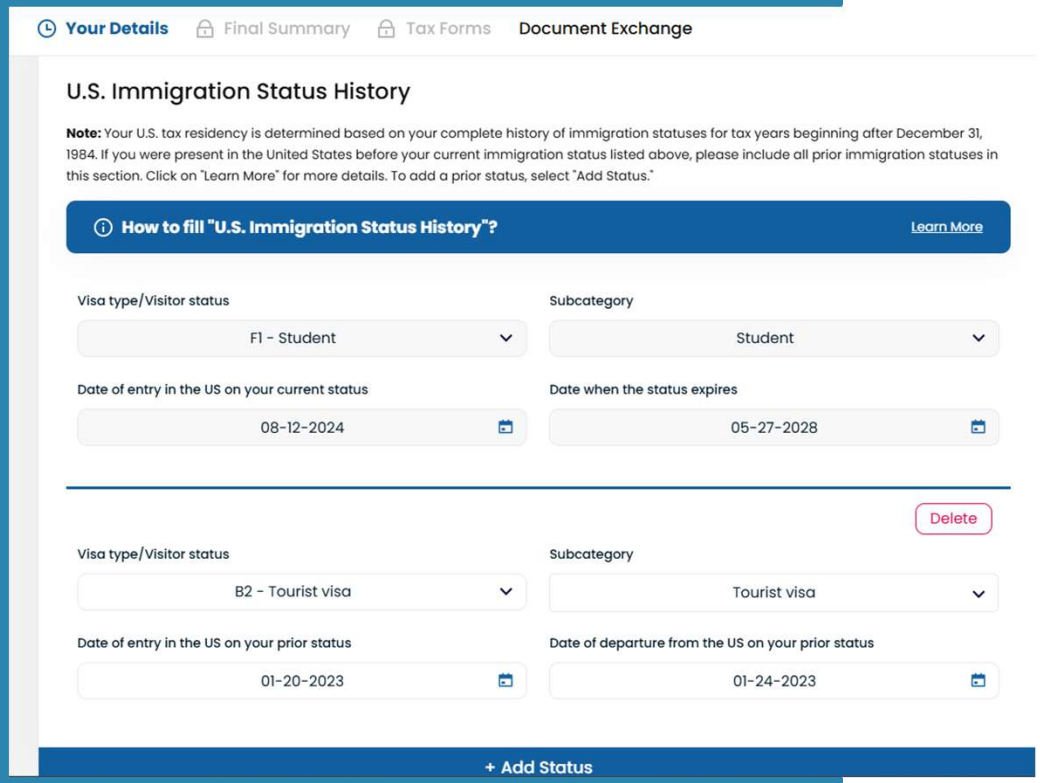
5 Yes or No Questions





Residency

- All US visits on an **F, J, M, or Q visa types** should be included
- **B visas, ESTA, H-1B, etc.** typically only need to go back **3 calendar years**
- Include **any visits where you may have claimed a tax treaty benefit** in the past

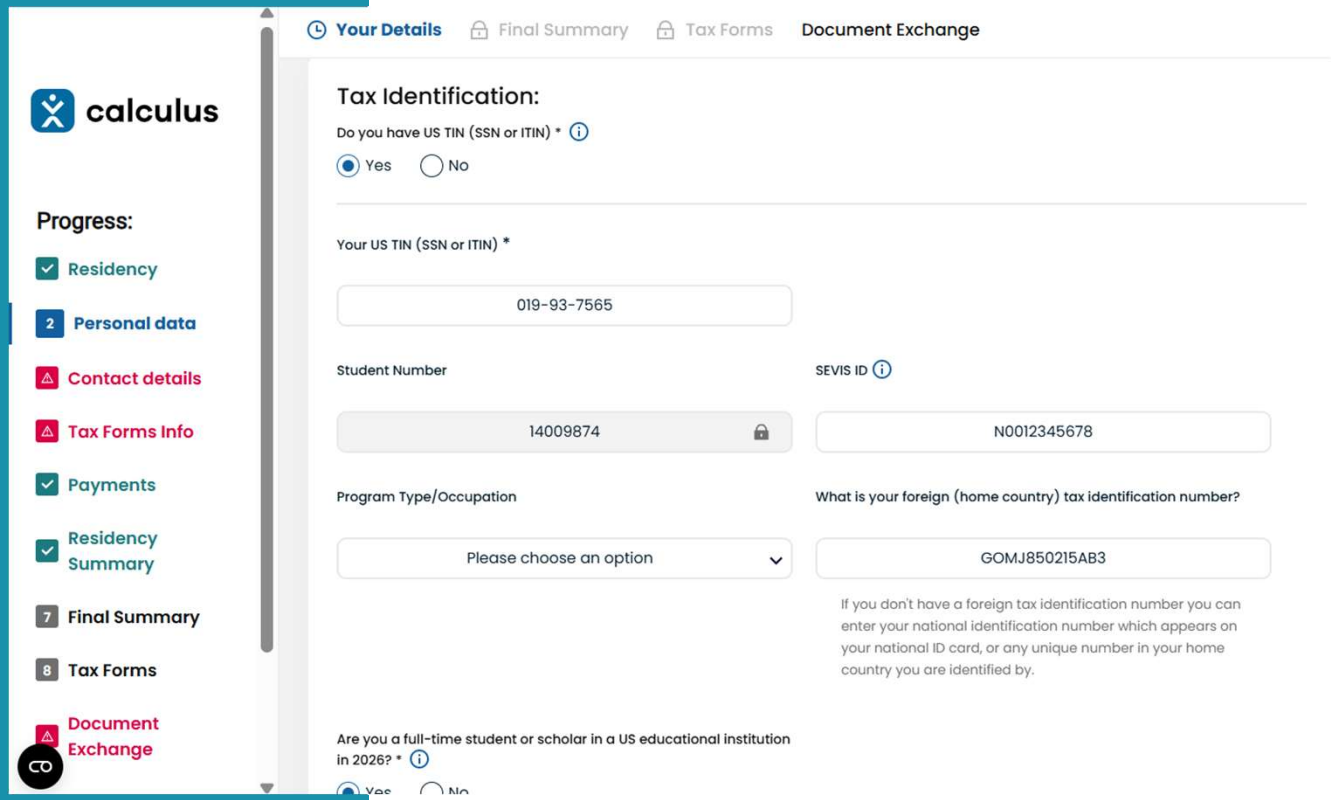


Residency

- Record all US visits between the first-ever U.S. visit (entered above) and your expected departure date
- All US visits on an **F, J, M, or Q visa types** should be included
- **B visas, ESTA, H-1B, etc.** typically only need to go back **3 calendar years**
- Include **any visits where you may have claimed a tax treaty benefit** in the past

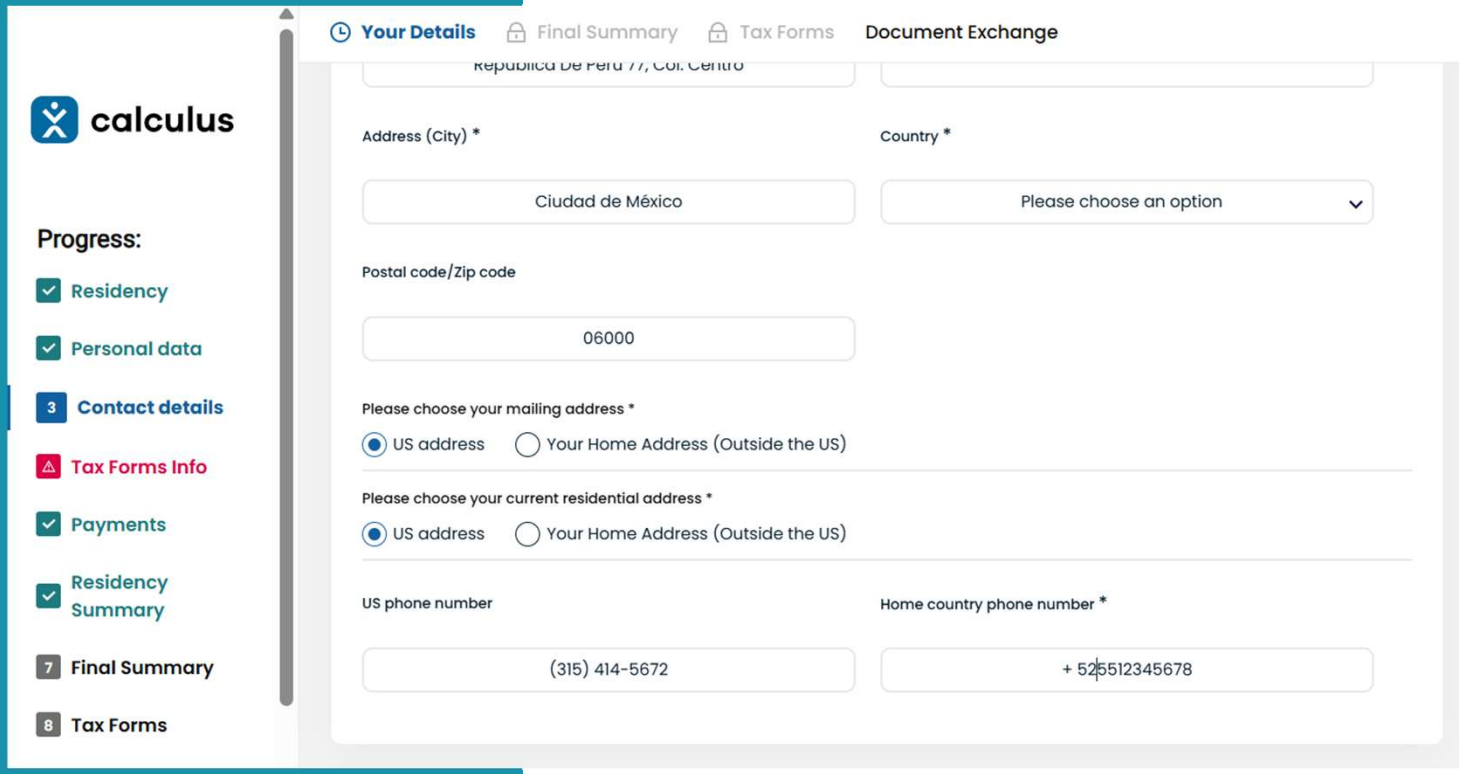
Tax Identification: Info Needed

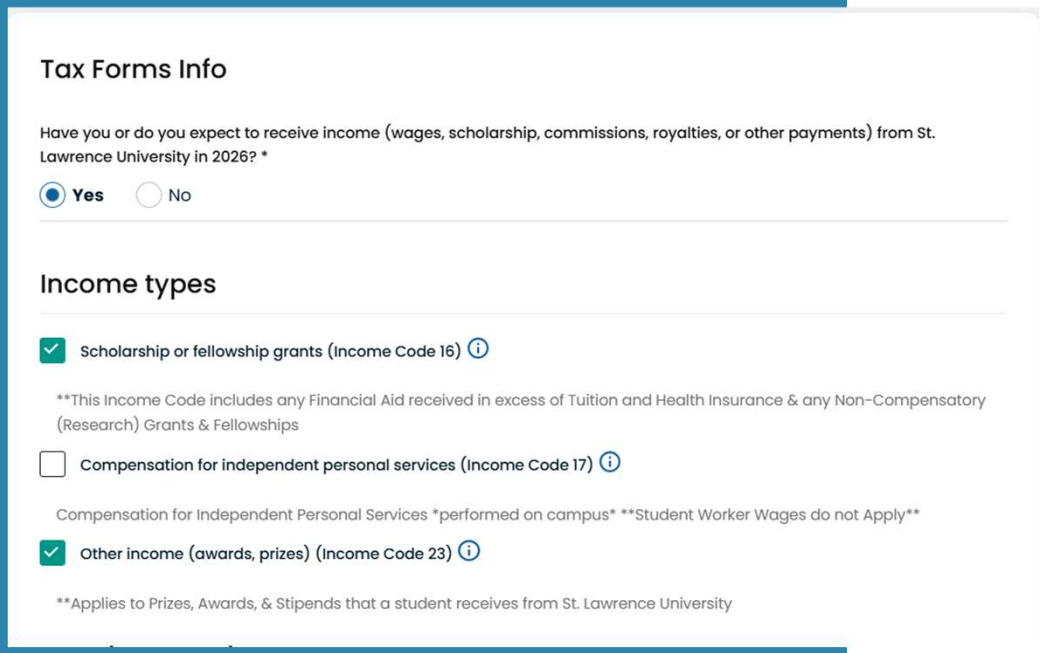
- US TIN
- SEVIS ID
- Home Country Tax ID Number
- Full-time Student Status
- Degree Candidate
- OPT/CPT Program participant



Contact Details

US Address preferable

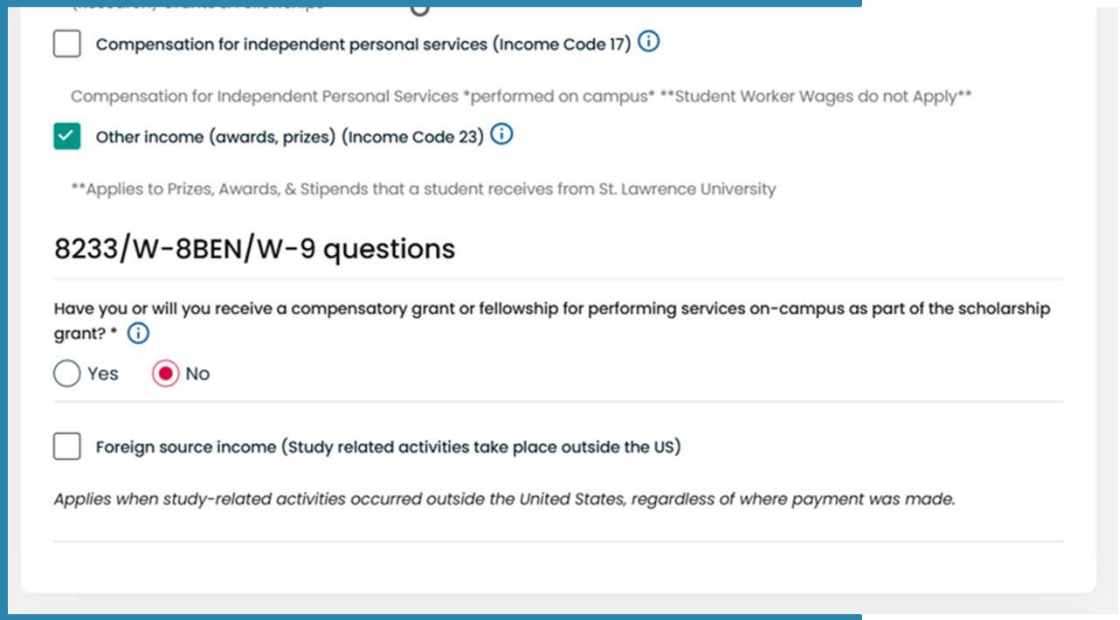




Tax Forms Info

- Income Code 16: Scholarship, Fellowship, and Grant Income

- Income Code 23: Awards and Prizes Income

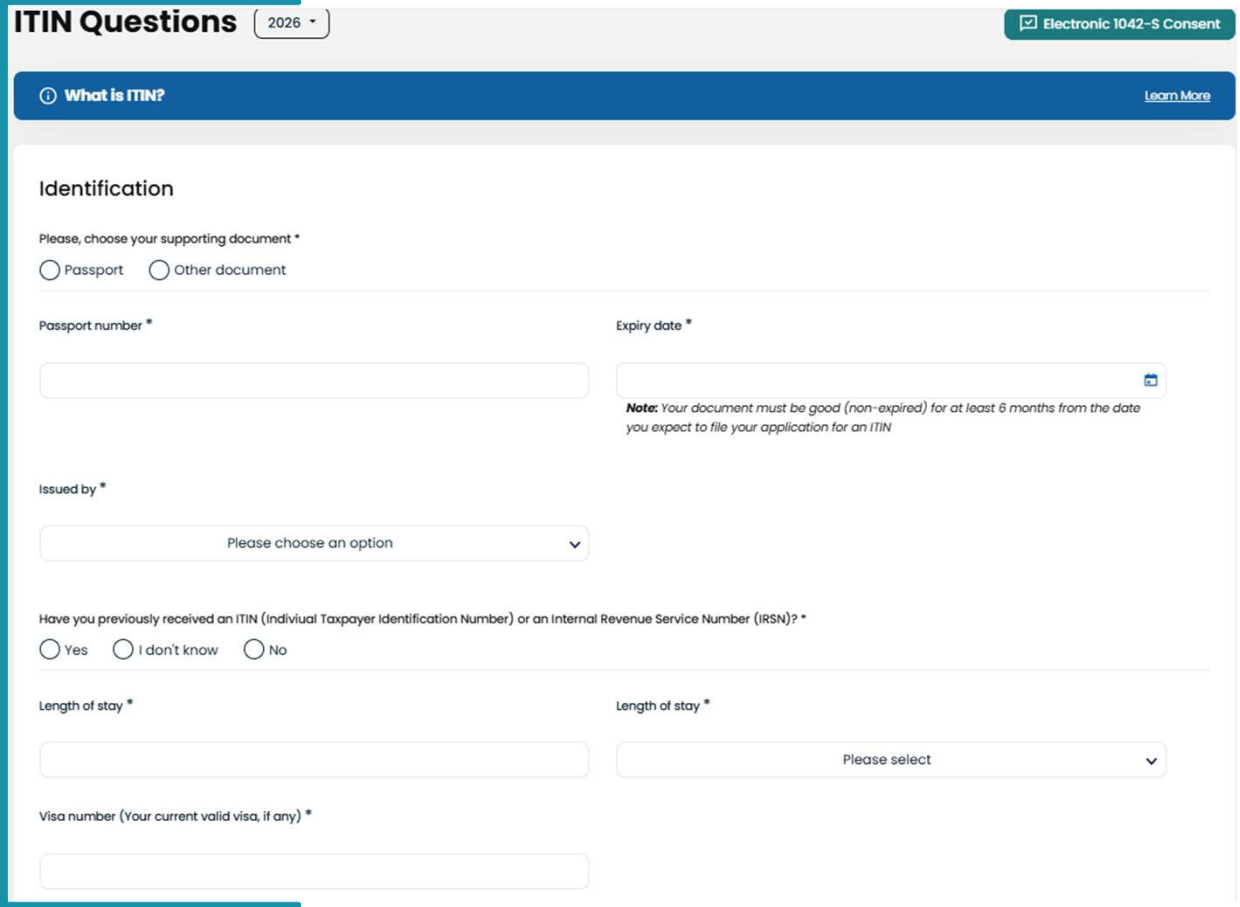


Tax Forms Info

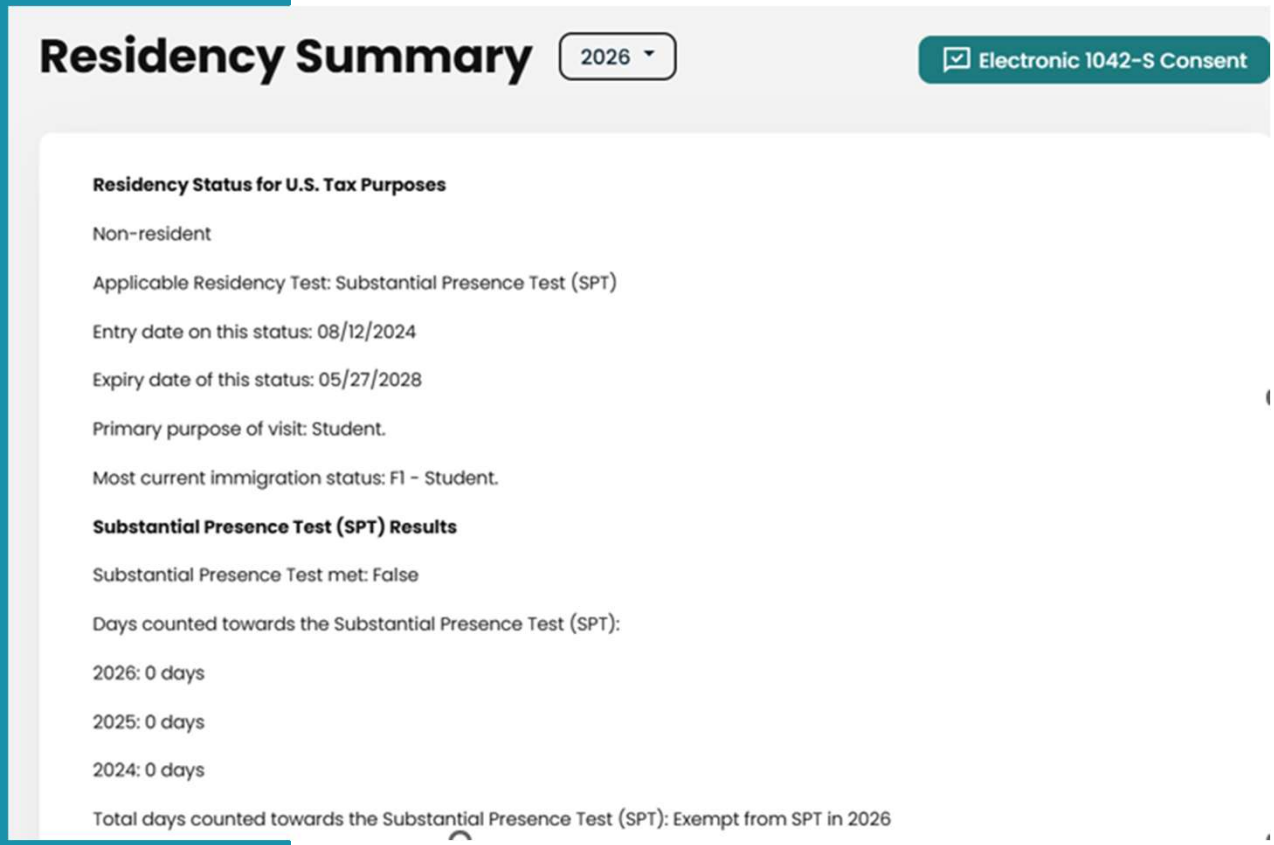
- Compensatory Grant or Fellowship (Income received for research or work performed on-campus)
- Foreign Source Income (Interest, Dividends, Scholarships from outside the U.S.)

ITIN Questions

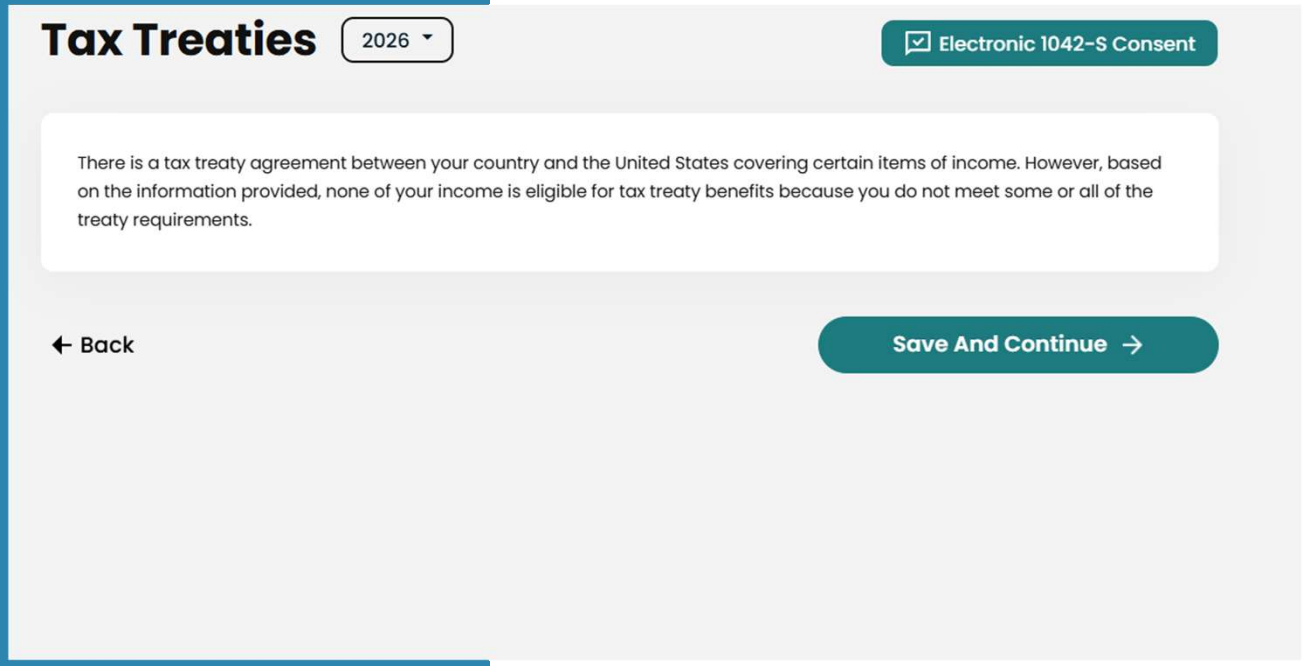
- Passport Number
- Expiry Date
- Issued By
- Previously issued
- Length of stay
- Visa Number



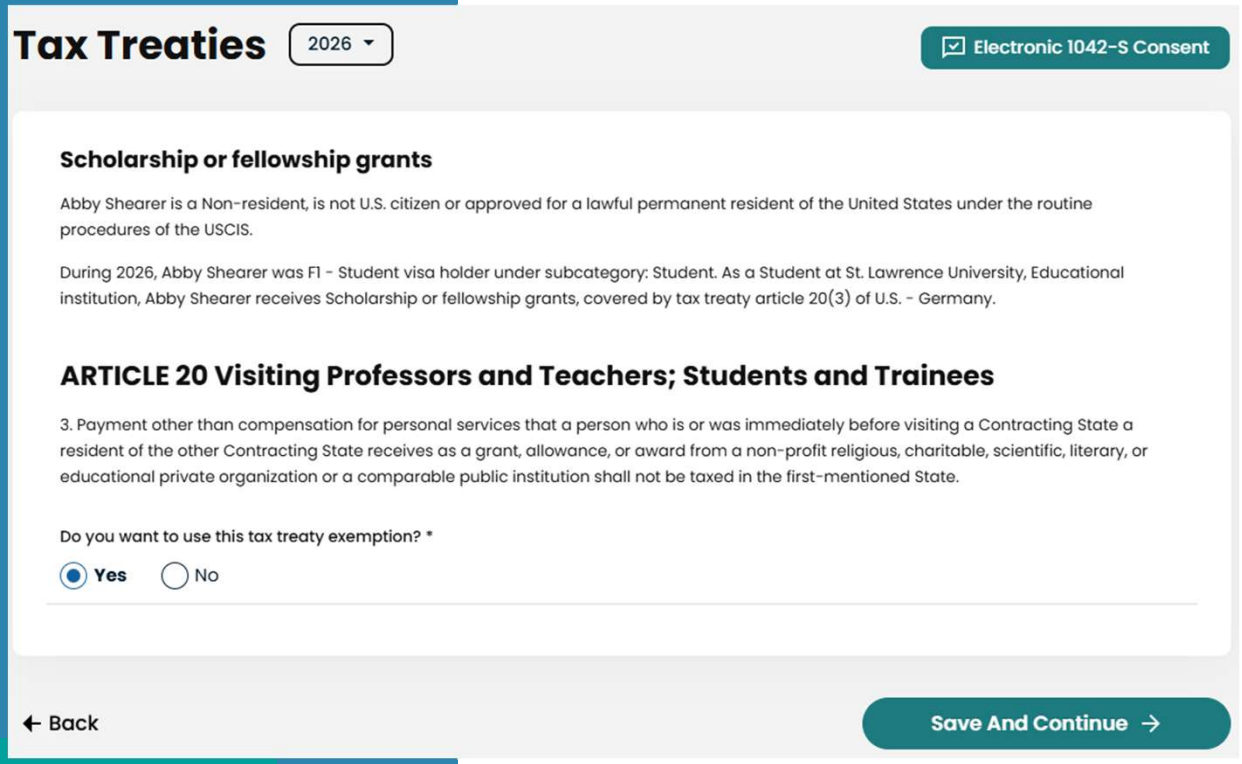
Residency Summary



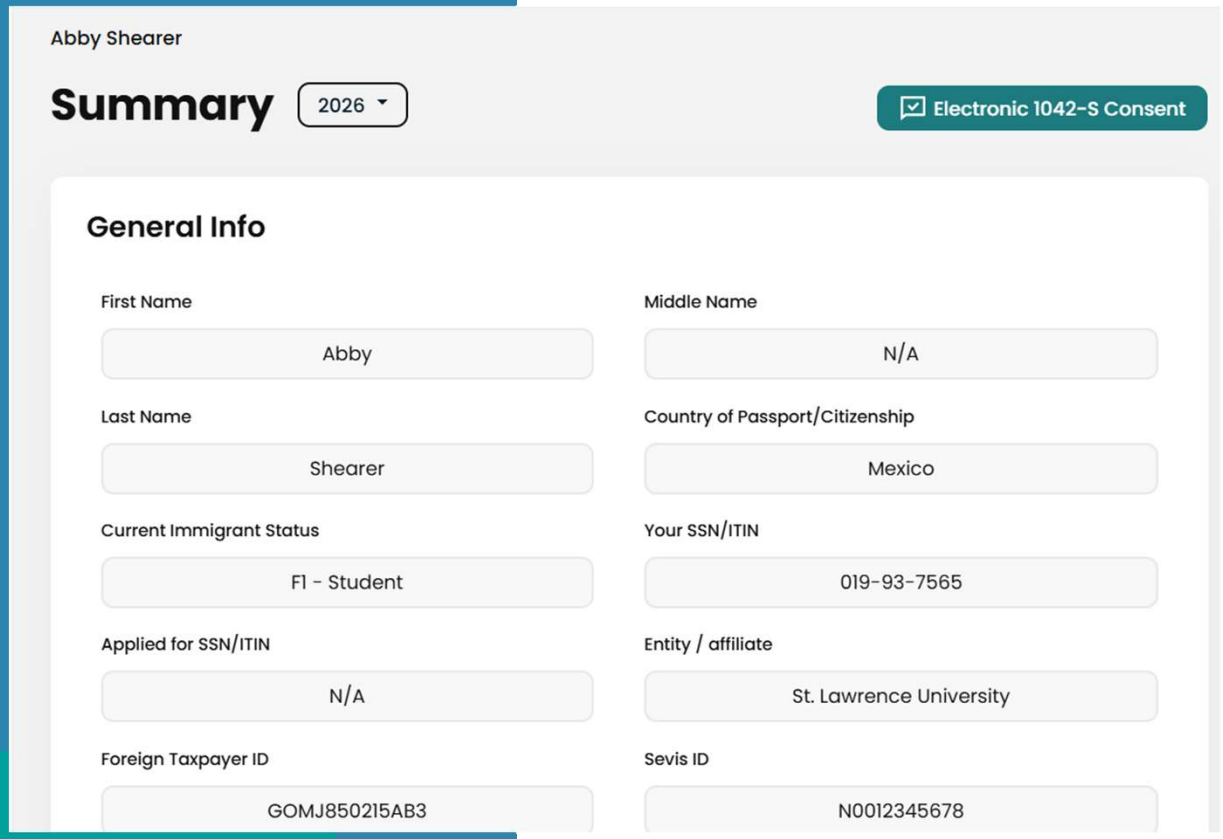
Tax Treaties

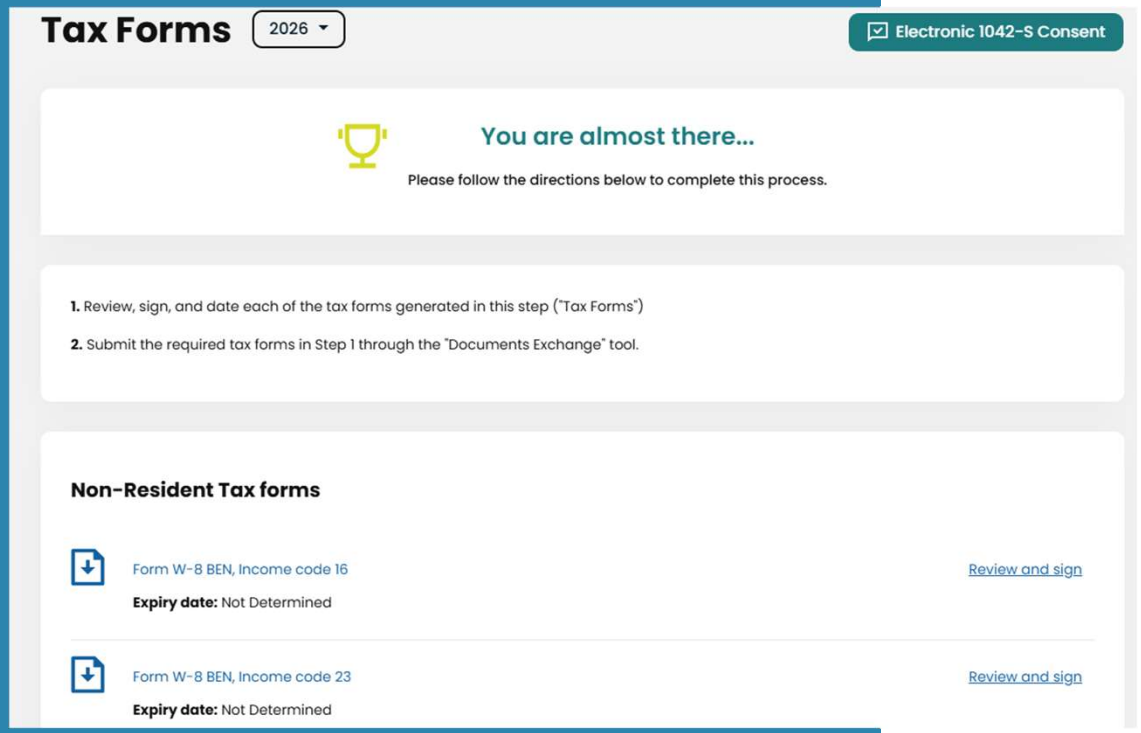


Tax Treaties



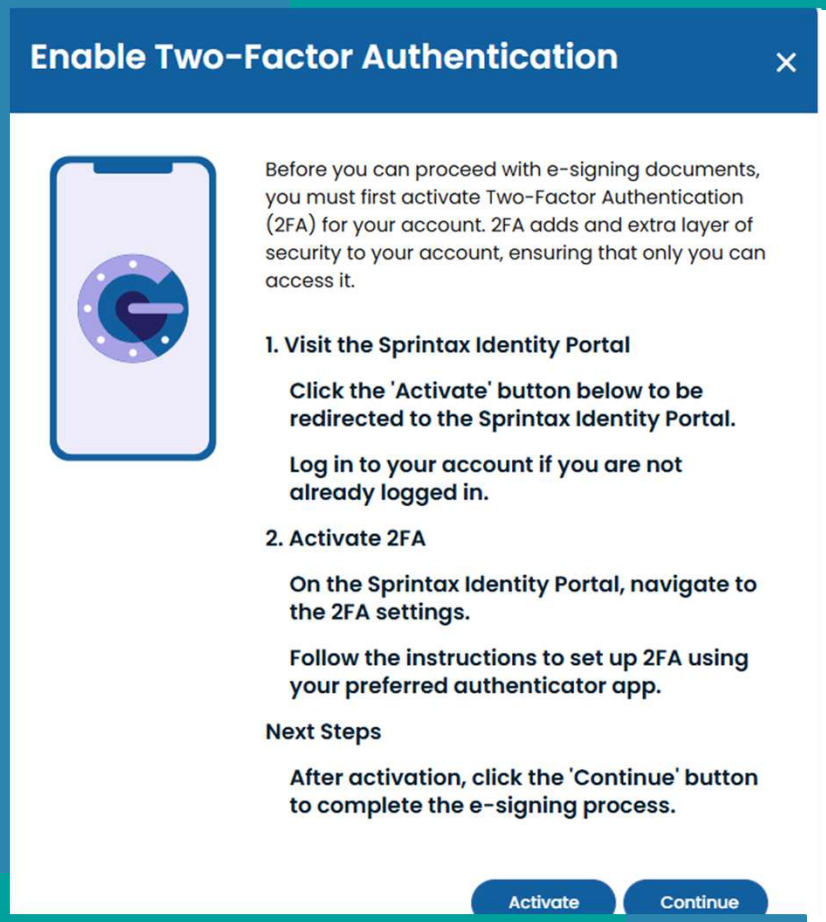
Summary and Review





Tax Forms Download

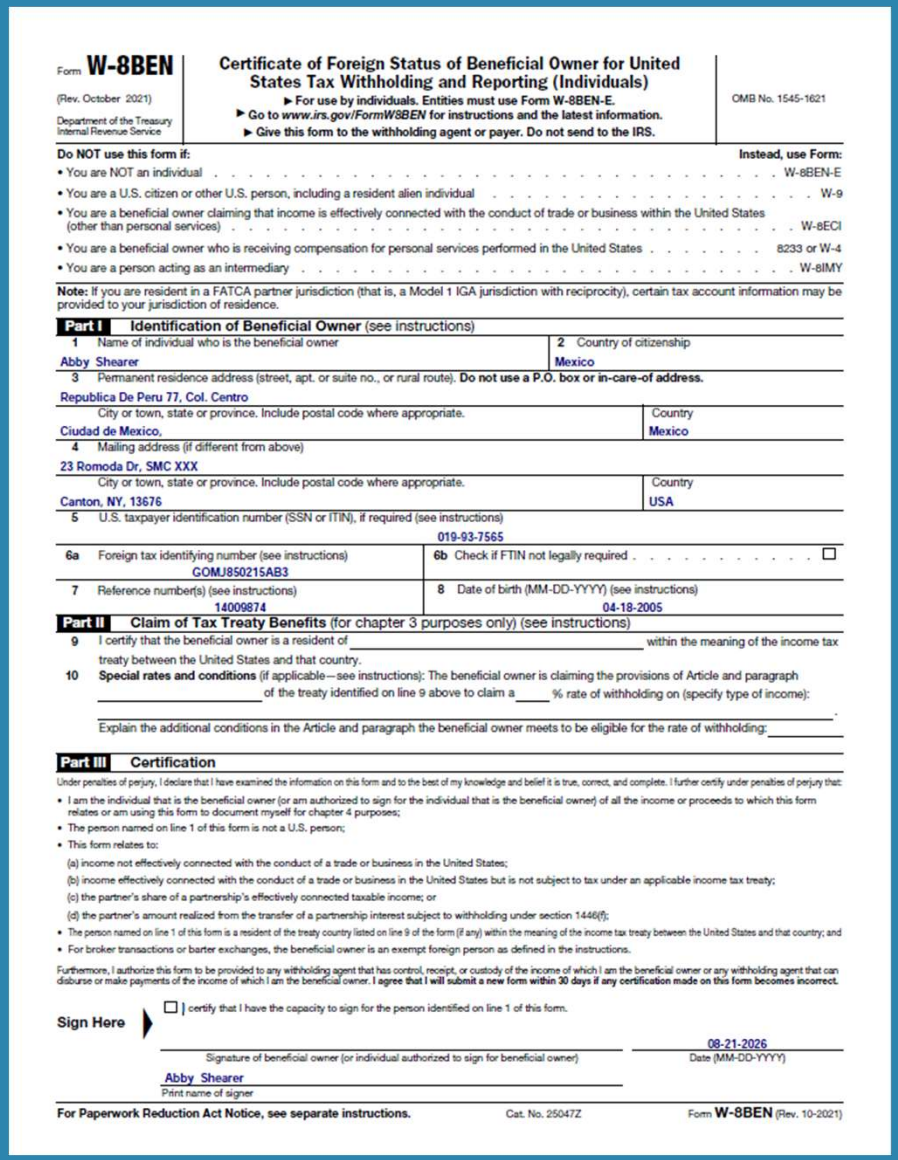
- W-8BEN Income Code 16
- W-8BEN Income Code 23
- W-7: ITIN Apply
- W-7 Certification Letter
- SS-5: SSN Apply



Enable Two-Factor Authentication

- Will need to enable to E-sign Documents

- Please contact Abby Shearer, ashearer@stlawu.edu, if the Authentication process is not working



Form **W-8BEN**
(Rev. October 2021)
Department of the Treasury
Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)
▶ For use by individuals. Entities must use Form W-8BEN-E.
▶ Go to *www.irs.gov/FormW8BEN* for instructions and the latest information.
▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

Do NOT use this form if: — **Instead, use Form:**
- You are NOT an individual . . . W-8BEN-E
- You are a U.S. citizen or other U.S. person, including a resident alien individual . . . W-9
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the United States (other than personal services) . . . W-8ECI
- You are a beneficial owner who is receiving compensation for personal services performed in the United States . . . 8233 or W-4
- You are a person acting as an intermediary . . . W-8IMY

Note: If you are resident in a FATCA partner jurisdiction (that is, a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.

Part I **Identification of Beneficial Owner** (see instructions)

1 Name of individual who is the beneficial owner: Abby Shearer
2 Country of citizenship: Mexico
3 Permanent residence address (street, apt. or suite no., or rural route). **Do not use a P.O. box or in-care-of address.**: Republica De Peru 77, Col. Centro
City or town, state or province. Include postal code where appropriate.: Ciudad de Mexico,
Country: Mexico
4 Mailing address (if different from above): 23 Romoda Dr, SMC XXX
City or town, state or province. Include postal code where appropriate.: Canton, NY, 13676
Country: USA
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions): 019-93-7565
6a Foreign tax identifying number (see instructions): GOMJ850215AB3
6b Check if FTIN not legally required . . . ☐
7 Reference number(s) (see instructions): 14009874
8 Date of birth (MM-DD-YYYY) (see instructions): 04-18-2005

Part II **Claim of Tax Treaty Benefits** (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.
10 **Special rates and conditions** (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 9 above to claim a ____ % rate of withholding on (specify type of income): _____
Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding: _____

Part III **Certification**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:
- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income or proceeds to which this form relates or am using this form to document myself for chapter 4 purposes;
- The person named on line 1 of this form is not a U.S. person;
- This form relates to:
  (a) income not effectively connected with the conduct of a trade or business in the United States;
  (b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an applicable income tax treaty;
  (c) the partner's share of a partnership's effectively connected taxable income; or
  (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

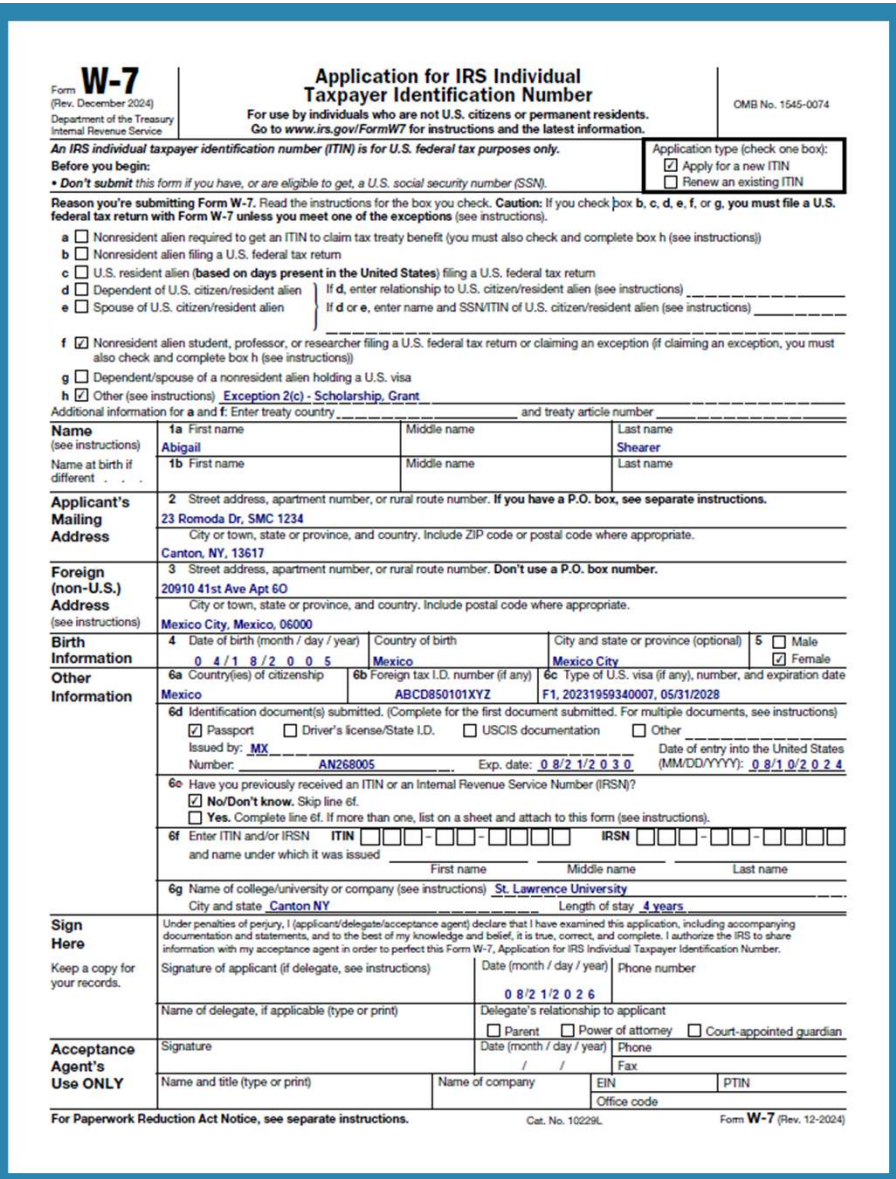
Sign Here ☐ I certify that I have the capacity to sign for the person identified on line 1 of this form.

Signature of beneficial owner (or individual authorized to sign for beneficial owner)
Date (MM-DD-YYYY): 08-21-2026
Print name of signer: Abby Shearer

For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 25047Z Form **W-8BEN** (Rev. 10-2021)

W-8BEN

- Will need to sign one of these forms for every income code you checked off on the Tax Forms Info page
- Proves foreign status and enables an individual to claim lower tax treaty rates.



Form **W-7** (Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number

For use by individuals who are not U.S. citizens or permanent residents.
Go to *www.irs.gov/FormW7* for instructions and the latest information.

OMB No. 1545-0074

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

Before you begin:

• ***Don't submit*** *this form if you have, or are eligible to get, a U.S. social security number (SSN).*

Application type (check one box):
☑ Apply for a new ITIN
☐ Renew an existing ITIN

Reason you're submitting Form W-7. Read the instructions for the box you check. **Caution:** If you check box **b**, **c**, **d**, **e**, **f**, or **g**, **you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions** (see instructions).

a ☐ Nonresident alien required to get an ITIN to claim tax treaty benefit (you must also check and complete box h (see instructions))
b ☐ Nonresident alien filing a U.S. federal tax return
c ☐ U.S. resident alien (**based on days present in the United States**) filing a U.S. federal tax return
d ☐ Dependent of U.S. citizen/resident alien
e ☐ Spouse of U.S. citizen/resident alien
If **d**, enter relationship to U.S. citizen/resident alien (see instructions) _____
If **d** or **e**, enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) _____
f ☑ Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception (if claiming an exception, you must also check and complete box h (see instructions))
g ☐ Dependent/spouse of a nonresident alien holding a U.S. visa
h ☑ Other (see instructions) Exception 2(c) - Scholarship, Grant
Additional information for **a** and **f**: Enter treaty country _____ and treaty article number _____

Name (see instructions)
Name at birth if different
1a First name: Abigail | Middle name | Last name: Shearer
1b First name | Middle name | Last name

Applicant's Mailing Address
2 Street address, apartment number, or rural route number. **If you have a P.O. box, see separate instructions.**
23 Romoda Dr, SMC 1234
City or town, state or province, and country. Include ZIP code or postal code where appropriate.
Canton, NY, 13617

Foreign (non-U.S.) Address (see instructions)
3 Street address, apartment number, or rural route number. **Don't use a P.O. box number.**
20910 41st Ave Apt 6O
City or town, state or province, and country. Include postal code where appropriate.
Mexico City, Mexico, 06000

Birth Information
4 Date of birth (month / day / year): 0 4/1 8/2 0 0 5 | Country of birth: Mexico | City and state or province (optional): Mexico City | 5 ☐ Male ☑ Female

Other Information
6a Country(ies) of citizenship: Mexico | 6b Foreign tax I.D. number (if any): ABCD850101XYZ | 6c Type of U.S. visa (if any), number, and expiration date: F1, 20231959340007, 05/31/2028
6d Identification document(s) submitted. (Complete for the first document submitted. For multiple documents, see instructions)
☑ Passport ☐ Driver's license/State I.D. ☐ USCIS documentation ☐ Other _____
Issued by: MX
Number: AN268005 Exp. date: 0 8/2 1/2 0 3 0
Date of entry into the United States (MM/DD/YYYY): 0 8/1 0/2 0 2 4
6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?
☑ **No/Don't know.** Skip line 6f.
☐ **Yes.** Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).
6f Enter ITIN and/or IRSN **ITIN** ☐☐☐-☐☐-☐☐☐☐ **IRSN** ☐☐☐-☐☐-☐☐☐☐
and name under which it was issued _____ (First name) _____ (Middle name) _____ (Last name)
6g Name of college/university or company (see instructions) St. Lawrence University
City and state Canton NY Length of stay 4 years

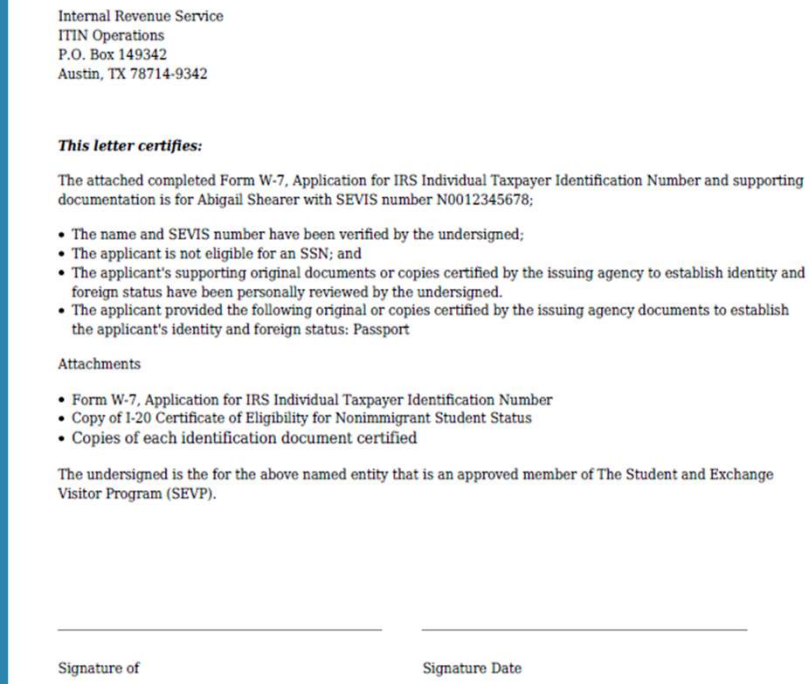
Sign Here
Keep a copy for your records.
Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.
Signature of applicant (if delegate, see instructions) | Date (month / day / year): 0 8/2 1/2 0 2 6 | Phone number
Name of delegate, if applicable (type or print) | Delegate's relationship to applicant: ☐ Parent ☐ Power of attorney ☐ Court-appointed guardian

Acceptance Agent's Use ONLY
Signature | Date (month / day / year) / / | Phone | Fax
Name and title (type or print) | Name of company | EIN | PTIN | Office code

For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 10229L Form **W-7** (Rev. 12-2024)

W-7: ITIN Apply

Work with Tsewang Lama, tlama@stlawu.edu, and Megan Putney, mputney@stlawu.edu, to get this form filed with the IRS



Internal Revenue Service
ITIN Operations
P.O. Box 149342
Austin, TX 78714-9342

This letter certifies:

The attached completed Form W-7, Application for IRS Individual Taxpayer Identification Number and supporting documentation is for Abigail Shearer with SEVIS number N0012345678;

- The name and SEVIS number have been verified by the undersigned;
- The applicant is not eligible for an SSN; and
- The applicant's supporting original documents or copies certified by the issuing agency to establish identity and foreign status have been personally reviewed by the undersigned.
- The applicant provided the following original or copies certified by the issuing agency documents to establish the applicant's identity and foreign status: Passport

Attachments

- Form W-7, Application for IRS Individual Taxpayer Identification Number
- Copy of I-20 Certificate of Eligibility for Nonimmigrant Student Status
- Copies of each identification document certified

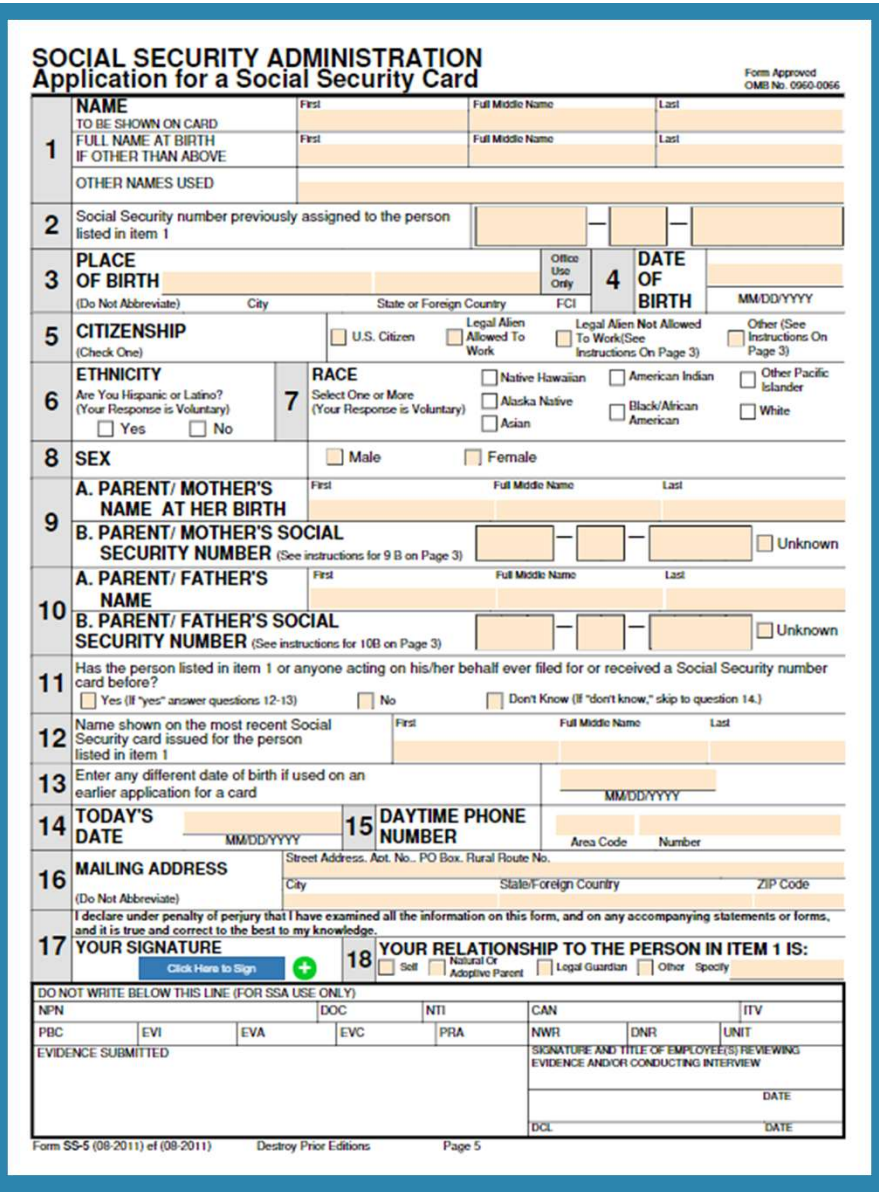
The undersigned is the for the above named entity that is an approved member of The Student and Exchange Visitor Program (SEVP).

Signature of

Signature Date

W-7: Certificate Letter

- Must be signed by Tsewang Lama or Megan Putney and filed with the W-7 form to the IRS



SOCIAL SECURITY ADMINISTRATION
Application for a Social Security Card

Form Approved
OMB No. 0960-0066

1	NAME TO BE SHOWN ON CARD	First	Full Middle Name	Last
	FULL NAME AT BIRTH IF OTHER THAN ABOVE	First	Full Middle Name	Last
	OTHER NAMES USED			
2	Social Security number previously assigned to the person listed in item 1			
3	PLACE OF BIRTH (Do Not Abbreviate) City / State or Foreign Country / Office Use Only FCI			
4	DATE OF BIRTH MM/DD/YYYY			
5	CITIZENSHIP (Check One)	☐ U.S. Citizen	☐ Legal Alien Allowed To Work	☐ Legal Alien Not Allowed To Work (See Instructions On Page 3) / ☐ Other (See Instructions On Page 3)
6	ETHNICITY Are You Hispanic or Latino? (Your Response is Voluntary) ☐ Yes ☐ No			
7	RACE Select One or More (Your Response is Voluntary)	☐ Native Hawaiian	☐ American Indian	☐ Other Pacific Islander
		☐ Alaska Native	☐ Black/African American	☐ White
		☐ Asian		
8	SEX	☐ Male	☐ Female	
9	A. PARENT/ MOTHER'S NAME AT HER BIRTH	First	Full Middle Name	Last
	B. PARENT/ MOTHER'S SOCIAL SECURITY NUMBER (See instructions for 9 B on Page 3)			☐ Unknown
10	A. PARENT/ FATHER'S NAME	First	Full Middle Name	Last
	B. PARENT/ FATHER'S SOCIAL SECURITY NUMBER (See instructions for 10B on Page 3)			☐ Unknown
11	Has the person listed in item 1 or anyone acting on his/her behalf ever filed for or received a Social Security number card before? ☐ Yes (If "yes" answer questions 12-13) ☐ No ☐ Don't Know (If "don't know," skip to question 14.)			
12	Name shown on the most recent Social Security card issued for the person listed in item 1	First	Full Middle Name	Last
13	Enter any different date of birth if used on an earlier application for a card	MM/DD/YYYY		
14	TODAY'S DATE MM/DD/YYYY	15 DAYTIME PHONE NUMBER	Area Code	Number
16	MAILING ADDRESS (Do Not Abbreviate)	Street Address, Apt. No., PO Box, Rural Route No.		
		City	State/Foreign Country	ZIP Code
17	I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, and it is true and correct to the best to my knowledge. YOUR SIGNATURE Click Here to Sign	18 YOUR RELATIONSHIP TO THE PERSON IN ITEM 1 IS: ☐ Self ☐ Natural Or Adoptive Parent ☐ Legal Guardian ☐ Other Specify		

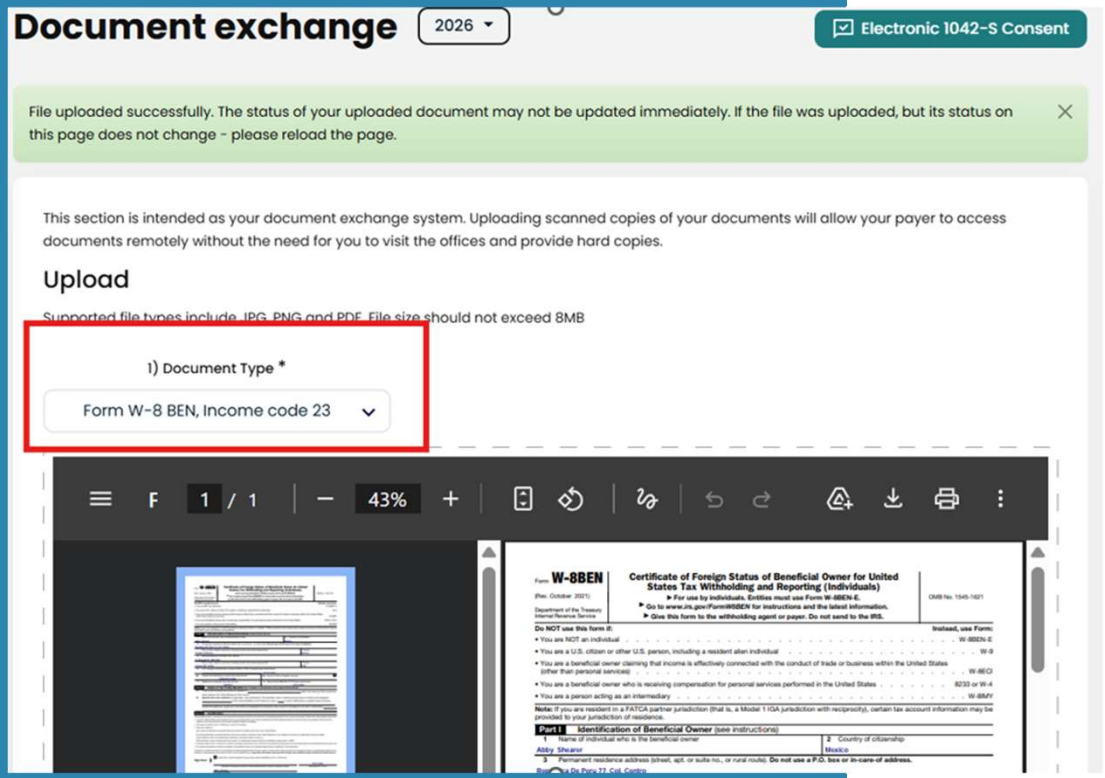
DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY)

NPN		DOC	NTI	CAN		ITV	
PBC	EVI	EVA	EVC	PRA	NWR	DNR	UNIT
EVIDENCE SUBMITTED				SIGNATURE AND TITLE OF EMPLOYEE(S) REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW			DATE
				DCL			DATE

Form SS-5 (08-2011) ef (08-2011) Destroy Prior Editions Page 5

SS-5: SSN Apply

Work with Tsewang Lama, tlama@stlawu.edu, and Megan Putney, mputney@stlawu.edu, to get this form filed with the IRS

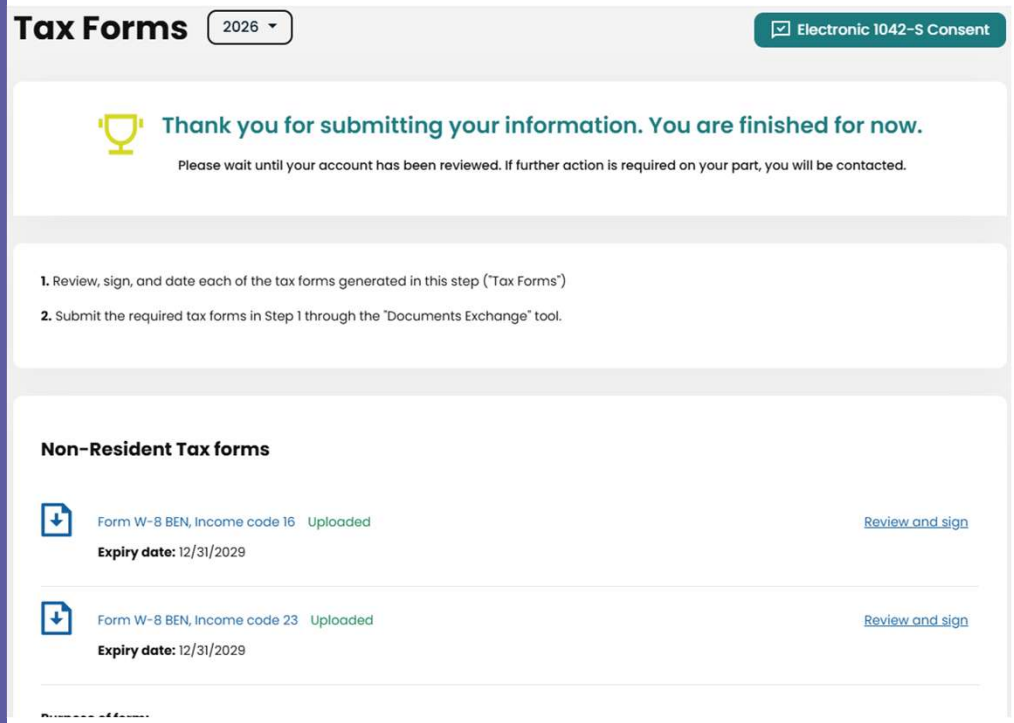


Document Upload

- Specify Document Type before Upload
- Should only need to upload the W-8BEN forms

Next Steps

- March 15th is the due date by which you will receive your 1042-S form
- You will then use the 1042-S and any other 20XX tax forms received to file your taxes by the April 15, 20XX



Contact for Questions

- Abby Shearer in Vilas 116A
- (315) 229-5320
- ashearer@stlawu.edu

Sprintax Calculus Customer Support
calculus@sprintax.com