



Employee request for refund of FICA taxes

Complete the information below and return this form to Payroll, mail code 6212, or email it to DL.ORG.FS.PY_STAFF@exchange.asu.edu. Federal law [IRC §31.6402\(a\)-2\(a\)\(2\)](#) requires that ASU obtains your signature before refunding the prior year's FICA taxes.

I request that my FICA taxes be refunded to me by Arizona State University. I certify that I have not, and will not, claim a refund from the Internal Revenue Service for the amount of FICA taxes withheld during the period indicated below.

Name

ASU employee number

Address

Phone

Pay period or date range requested

Reason for refund

- F-1 or J-1 NRA exemption.
- Repayment of overpayment from a prior year.
- Student FICA tax exemption.

Signature

Date

For ASU use only. Do not write in this space.	
Date refund was issued	
Check number	
Check amount	
Prepared by	
Date W2C was issued	
QTR/YR 941X	
Social Security wages	
Approved by	