



**Employee request for refund of FICA taxes**

Complete the information below and return this form to Payroll Services, Mail Code 6212, or fax it to 480-965-0554.  
Federal law – IRC §31.6402(a)-2(a)(2) – requires that we obtain your signature before refunding prior year FICA taxes.

I request that my withheld 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 time period indicated below.

Name:

ASU employee number:

Address:

Phone:

Pay period or date range requested:

Reason for refund:	Student FICA tax exemption	F-1 or J-1 NRA exemption
	Repayment of overpayment from a prior year	

Signature: \_\_\_\_\_ Date:

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