OFFICE OF FINANCIAL AID PHONE: (845) 257-3250 FAX: (845) 257-3568 MAIL THIS FORM TO: SUNY New Paltz Financial Aid Office 200 Hawk Drive New Paltz, NY 12561

## **Statement of Parent Income**

FORM B 2017-2018

Student's Name: \_\_\_\_\_Student ID:\_\_\_\_

Parent(s) Name(s):\_\_\_\_\_

Check the box that applies:

### We/I did file a 2015 Federal IRS Tax Return.

If you checked this box, please be sure that you have used the **IRS Data Retrieval Tool when filing your 2017-2018 FAFSA**. Instructions to update/complete your 2017-2018 FAFSA with the IRS Data Retrieval tool can be found here: www.newpaltz.edu/media/financial-aid/1718/tax15.pdf

If you were unable to use the IRS Data Retrieval Tool attach a signed copy of your 2015 federal **IRS Tax Return Transcript** to this form and return it to the Office of Financial Aid. Visit <u>www.irs.gov</u> or call 1-800-908-9946 to obtain an IRS Tax Return Transcript. **\*Due to federal regulations, schools cannot accept photocopies of tax returns.\*** 

# We/I were not employed, had no income earned from work in 2015, and has not filed/will not file/are not required to file a 2015 Federal tax return.

Please request a **2015 IRS Confirmation of Non-filing Letter**. Please visit <u>www.irs.gov</u> to obtain a Confirmation of Non-Filing Letter. This IRS statement of non-filing status will be required from the IRS by using IRS form 4506-T and checking box 7. Once received from the IRS, attach the copy to this form and return it to the Office of Financial Aid.

### We/I were employed in 2015 but has not filed/will not file/are not required to file a 2015 tax return.

Please complete the below section and request a 2015 IRS Confirmation of Non-filing Letter. Please visit *www.irs.gov* to obtain a Confirmation of Non-Filing Letter. This IRS statement of non-filing status will be required from the IRS by using IRS form 4506-T and checking box 7. Once received from the IRS, attach the copy to this form and return it to the Office of Financial Aid. \*\*\*ATTACH ALL 2015 W-2's\*\*\*

| Employer's Name/Source | 2015 Amount<br>Earned | IRS W-2 Provided?<br>(Yes/No) |
|------------------------|-----------------------|-------------------------------|
|                        |                       |                               |
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#### CERTIFICATION STATEMENT AND SIGNATURE:

I/We certify that all of the information reported on this form is complete and accurate to the best of our knowledge. We also acknowledge that we have read and agree to comply with all verification policies available in the verification brochure including the "Deadlines for Submitting Documents".