

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
2018-2019

Student's Name: _____ Student ID: _____

Parent(s) Name(s): _____

Check the box that applies:

We/I filed a 2016 Federal IRS Tax Return.

If you checked this box, please be sure that you have used the **IRS Data Retrieval Tool when filing your 2018-2019 FAFSA**. Instructions to update/complete your 2018-2019 FAFSA with the IRS Data Retrieval tool can be found here: <http://www.newpaltz.edu/media/financial-aid/1819/tax16.pdf>

If you were unable to use the IRS Data Retrieval Tool attach a signed copy of your 2016 federal **IRS Tax Return Transcript** to this form and return it to the Office of Financial Aid. Visit www.irs.gov 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 2016, and have not filed/will not file/are not required to file a 2016 Federal tax return.

All parents who were non-tax filers for the tax year of 2016, are required to submit a 2016 **IRS Confirmation of Non-filing Letter** (dated on or after 10/1/17). Please visit www.irs.gov to obtain a Confirmation of Non-Filing Letter by completing IRS form 4506-T (check box 7 and enter 12/31/2016 for step 9). 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 2016 but have not filed/will not file/are not required to file a 2016 tax return.

Please complete the below section. All parents who were non-tax filers for the tax year of 2016, are required to submit a 2016 **IRS Confirmation of Non-filing Letter** (dated on or after 10/1/17). Please visit www.irs.gov to obtain a Confirmation of Non-Filing Letter by completing IRS form 4506-T (check box 7 and enter 12/31/2016 for step 9). Once received from the IRS, attach the copy to this form and return it to the Office of Financial Aid.

*****ATTACH ALL 2016 W-2's*****

Employer's Name/Source of Income	2016 Amount Earned	IRS W-2 Provided? (Yes/No)

CERTIFICATION STATEMENT AND SIGNATURE:

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

Signature of Parent

Date