

2018-2019 Independent Verification Worksheet Independent

Your application was selected for review in a process called "Verification." In this process, your school will be comparing information from your FAFSA application with copies of your and your spouse's 2016 federal tax return transcripts, or other financial documents. The law states we have the right to ask you for this information before awarding federal aid. If there are differences between your FAFSA application information and your financial documents, you or your school may need to make corrections electronically, or by using your Student Aid Report (SAR).

- 1. Submit the completed 2018-2019 Independent Verification Worksheet. Make sure the form is signed by the student. This form has three pages and needs to be filled out completely; if the answer is zero, write "0," do not leave blank.
- 2. If the number in the household and/or college you are reporting on the Verification Worksheet does not match the number(s) you reported on the FAFSA, submit a written explanation of the discrepancy which must be signed by the student.
- 3. Submit 2016 Federal Tax Return Transcript(s) for both student and spouse, if filed. As per federal regulations, we can no longer accept copies of the filed federal tax return unless it is specifically requested by the financial aid department. You can obtain a Federal Tax Return Transcript by calling the IRS at 1-800-908-9946 or at www.irs.gov/individuals/get-transcript.
- **If filed**, the following schedules and forms are required from your tax return: 4.
 - Schedule C (business income)
 - **Schedule E** (property rental, royalties, S corps, trusts, etc.)
 - **1099 R** (distributions from IRS, pensions, annuities, etc.)

If child support was paid, submit a print-out of the child support paid. Also indicate to whom it was paid and for which children.

A. Student Information

| YSU Banner ID | Last Name | First Name | M.I. |
|----------------|-----------|--------------|------|
| | | | |
| Street Address | | | |
| | | | |
| City | State | Zip Code | |
| | | | |
| Date of Birth | | Phone Number | |

B. Family Information

- 1. List the people in your household, including:
 - yourself and your spouse, if you have one, and
 - your children, if you will provide more than half of their support from July 1, 2018 through June 30, 2019, even if they do not live with you, and
 - other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2018 through June 30, 2019.

Write names of all household members in the space(s) below. Also write in the name of the college for any household member(s), who will be

| Full Name | Age | Relationship | College | |
|---|--|---|---|--|
| | | Self | YSU | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Did one or more persons listed above re amps) at any time during 2016 or 2017? | ceive benefits from t | he Supplemental Nutrition | Assistance Program (SNAP, formerly known as food | |
| YESNO | | | | |
| | | | | |
| Student's Tax Forms and Incom | e Information | | | |
| Charles and the second | and the development of the control o | DC Tare Datasan T | 511 - F 4040 4040 4040 1 | |
| | | | om filing Form 1040, 1040A, 1040EZ, and a tax returat www.irs.gov/individuals/get-transcript. | |
| ☐ Check here if you are attaching | g a copy of your IRS T | ax Return Transcript | | |
| ☐ Check here if Tax Return Trans | | | (date) | |
| \Box Check here if you used the IRS | | - | ` , | |
| ☐ Check here if you will not file a | | | | |
| (Submit copy of W-2 for each | source of employmen | nt income and provide IRS V | Verification of Nonfiling.) | |
| List funds/support received for other un | taxed income, not re | ported on a tax return: | | |
| Source of Untaxed Income | | | 2016 Amount Received | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| . Spouse's Tax Forms and Income | information (if / | Аррисавіе) | | |
| Check only one how helpy. Tay transcrip | nts include the 2016 I | RS Tay Return Transcript fr | om filing Form 1040, 1040A, 1040EZ, and a tax retur | |
| | | | at www.irs.gov/individuals/get-transcript. | |
| ☐ Check here if you are attaching | | | | |
| | | se s joint ins rax netarii in | | |
| Check here and attach a conv | of vour spouse's IRS i | Fax Return Transcript if you | ir spouse men a separate fax remin | |
| | | Fax Return Transcript if you II be submitted to school by | · | |
| ☐ Check here if the spouse's Tax | Return Transcript wi | ll be submitted to school by | y (date) | |
| ☐ Check here if the spouse's Tax ☐ Check here if you used the IRS | Return Transcript will data retrieval tool to | Il be submitted to school by upload your spouse's tax i | y — (date) information into the FAFSA | |
| \Box Check here if the spouse's Tax | Return Transcript will data retrieval tool to not file and is not rec | Il be submitted to school by upload your spouse's tax i quired to file a 2016 U.S. Inc | y — (date) information into the FAFSA come Tax Return. | |
| ☐ Check here if the spouse's Tax☐ Check here if you used the IRS☐ Check here if your spouse will | Return Transcript wi data retrieval tool to not file and is not rec source of employmen | Il be submitted to school by upload your spouse's tax i quired to file a 2016 U.S. Ind It income and provide IRS N | y (date) information into the FAFSA come Tax Return. Verification of Nonfiling.) | |

Source of Untaxed Income 2016 Amount Received

| 2016 Additional Financial Information | Student/Spouse |
|--|----------------|
| a. Education credits (American Opportunity or Lifetime Learning tax credits) from IRS | \$ |
| Form 1040-line 50 or 1040A-line 33. | |
| b. Child support paid because of divorce or separation or as a result of a legal | \$ |
| requirement. | |
| Do not include support for children in your household, as reported in question 95. | |
| c. Taxable earnings from need-based employment programs, such as Federal Work- | \$ |
| Study and need-based employment portion for fellowships and assistantships. | |
| d. Grant and scholarship aid reported to the IRS in the adjusted gross income. | \$ |
| Includes AmeriCorps benefits (awards, living allowances, and interest accrual payments), as well | |
| as grant and scholarship portions of fellowships and assistantships. | |
| e. Combat pay or special combat pay. Only enter the amount that was taxable and included | \$ |
| in the adjusted gross income. Do not enter untaxed combat pay. | |
| f. Earnings from work under a cooperative education program offered by a college. | \$ |
| | |

| 2016 Untaxed Income | Student/Spouse |
|---|----------------|
| a. Payments to tax-deferred pension and saving plans (paid directly or withheld from | \$ |
| earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes | |
| 12a through 12d, codes D, E, F, G, H and S. Do not include amounts reported in code DD | |
| (employer contributions toward employee health benefits). | |
| b. IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other | \$ |
| qualified plans from IRS Form 1040-line 28 + line 32 or 1040A-line 17. | |
| c. Child support received for all children. | \$ |
| Do not include foster care or adoption payments. | |
| d. Tax exempt interest income from IRS Form 1040-line 8b or 1040A-line 8b. | \$ |
| | |
| e. Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or | \$ |
| 1040A-lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here. | |
| f. Untaxed portion of pensions from IRS Form 1040-lines (16a minus 16b) or 1040A- | \$ |
| lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here. | |
| g. Housing, food and other living allowances paid to members of the military, clergy, | \$ |
| and others (including cash payments and cash value of benefits). Do not include the | |
| value of on-base military housing or the value of a basic military allowance for housing. | |
| h. Veterans non-education benefits such as Disability, Death Pension, or Dependency | \$ |
| & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances. | |
| i. Other untaxed income not reported, such as workers' compensation, disability, etc. | \$ |
| Do not include student aid, earned income credit, additional child tax credit, welfare payments, | |
| untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act | |
| educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria | |
| plans), foreign income exclusion, or credit for federal tax on special fuels. | |
| j. Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this | \$ |
| form. | |

| Each person signing the verification applicable, must sign and date. | on worksheet is certifying that all information repo | orted is complete and correct. The student and spouse, if |
|--|--|---|
| Student | Date | WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, |
| Spouse | Date | sentenced to jail, or both. |

