

Office of Financial Aid

2014-2015 Additional Financial Information Verification Form

The purpose of this form is to verify your 2013 IRS Income Tax Return and untaxed income information. It is a supplement to completing the IRS Data Retrieval tool <u>or</u> submitting 2013 Federal IRS Tax Return Transcripts (one of these two options is required to satisfy *Parent or Student Tax Data* requirements). Please complete page 1 and page 2 of this form and return to the Financial Aid Office by US Mail, FAX, or Email. For questions, call 717.691.6007.

Student Information

Last Name		First Name	M.I.	Messiah College Student ID
Date of Birth	Home Phone Number	Student	's E-mail	Parent's E-mail
If you have not already best way to verify incomplete the two verify incomplete the two verify incomplete the two verify incomplete the two verifies and the verifies and the verifies and the verifies and the verifies and verif	ome is to re-submit your 2 ks after filing taxes on-line DRT, attach to this form a onot send IRS forms 10 or Get Transcript by MA	eval Tool (IRS DR 2014-2015 FAFSA e or 6 weeks after f Il 2013 Federal IR: 40 unless reques AIL at <u>www.irs.gov</u> Tax Return by usi	on the Web at Filling by hard copy Tax Return Tranted.) You can obta Individuals/Get- Ing Form 4506T (nscripts for you, your parent(s) or your ain a transcript, free of charge, by: (1) Transcript; (2) order by calling 1-800-www.irs.gov/pub/irs-pdf/f4506t.pdf). If
Please note that the	•	I not be complete	e until the FAFS	A is (re)submitted using the data
If you or your parent	ople who did not and wi (s) (dependent student), o 3 Federal income tax retu	r you or your spou	se (independent s	tudent) did not file and are not
` ,	and are not required to file udent: □ You □ Father □			□ You □ Your Spouse
parent(s) (depend received in 2013, (ent student) or your and y	our spouse's (inde	pendent student)	form, list below your and your employer(s) and any income Please submit a copy of the

Your (the student) and Amount(s) Your Parents' Employer(s) Amount(s) your spouse's Employer(s) (dependent students) \$ \$.00 .00 \$ \$.00 .00 \$.00 \$.00

Once completed, proceed immediately to second page.

2013 Additional Financial Information: Enter "0" if the answer is "none". **Do not leave any item blank.**

Studen	<u>at/Spouse</u>	Parent(s)		
\$	Taxable earnings from need-based employment programs, such as Federal Work-Study.	\$		
\$	Taxable student grant and scholarship aid reported to the IRS in your adjusted gross income Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.			
\$	Combat pay or special combat pay; only enter the amount that was taxable.	\$		
<u>2013 (</u>	Untaxed Income: Enter "0" if the answer is "none". Do not leave any items blank.			
\$	Payments to tax-deferred pension and savings 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.	\$		
\$	Child support received for all children. Don't include foster or adoption payments.	\$		
\$	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.			
\$	Untaxed portions of pensions from IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.			
\$	Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.			
\$	Veterans non-education benefits – list benefit:			
\$	Other untaxed income not reported above, such as worker's compensation, disability, etc. List source of Untaxed Income			
\$	Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form.	\$ XXXXXXX		
Each po	This Form erson signing this form certifies that all the information reported on this form is complete and correct.			
Depend	dent Student: Student and one parent must sign. Independent Student: If married, spouse's signatu	ıre is optional.		
Student	's Signature Date Parent's Signature or Spouse's Signature	Date		

SEND THIS FORM TO THE FINANCIAL AID OFFICE BY US MAIL, FAX, or EMAIL.