



Please complete in blue or black ink if possible. Typed signatures will not be accepted.

Student Financial Services

P 206-281-2061 or 800-737-8826 (toll free)

E sfs-forms@spu.edu F 206-281-2835

3307 Third Avenue West, Suite 114, Seattle, Washington 98119

SPU.EDU/SFS

2021 - 2022 PARENT INCOME AND TAX FILER STATUS FORM

STUDENT NAME: _____ SPU ID: _____

Note: FAFSA applicants must submit tax information from two years prior—in this case, 2019.

SECTION ONE: Tax Filer Status (check the appropriate box below)

- Check here if you will not file and are not required to file a 2019 U.S. Income Tax Return. OR Check here if you have filed or will file a 2019 U.S. Income Tax Return. OR Check here if you have been granted a tax filing extension by the IRS. Please attach a copy of IRS Form 4868 or Extension Approval.

SECTION TWO: Wages (W-2) (check the appropriate box below)

- I/we did not work and had no income earned from work during 2019. OR I/we did work and earned W-2 income from work during 2019.

Please complete the table below using information found on your 2019 U.S. Income Tax Return and W-2 forms.

IF YOU DID NOT FILE A 2019 TAX RETURN YOU MUST ATTACH YOUR W-2s TO THIS FORM

Table with 4 columns: Parent(s)' Name on W-2 (Box e), W-2 Box 1 Amount, W-2 Boxes 12a-12d (only codes D* (*not DD), E, F, G, H, & S) Total Amount, W-2 Box 14 Housing or Living Allowance Total Amount. Includes rows for reporting earnings.

If additional space is needed to report W-2 earnings, please use the reverse side of this form.

- OR If you did not receive a W-2, but did work in 2019 please provide source of income and amount: Source: _____ Amount: \$ _____

SECTION THREE: Business and Farm Income (Reported on U.S. Income Tax Return Form 1040 only)

- I/we reported income on Schedule 1, Line 3 of your 2019 U.S. Income Tax Return Form 1040: Parent 1 Business Owner: _____ Amount of Income Reported: \$ _____ Parent 2 Business Owner: _____ Amount of Income Reported: \$ _____ ** If income on Schedule 1, Line 12 is only for one parent, leave "Parent 2" blank** I/we reported income on Schedule 1, Line 6 of your 2019 U.S. Income Tax Return Form 1040: Name of Farm Owner: _____ Amount of Income Reported: \$ _____

By signing this verification statement, I attest that all information reported on this form is true and complete to the best of my knowledge. If asked, I agree to submit documentation supporting the information provided on this form.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both.

Parent Signature _____ Date _____ Phone _____ Email _____

22222		a Employee's social security number		OMB No. 1545-0008		
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld	
			5 Medicare wages and tips		6 Medicare tax withheld	
			7 Social security tips		8 Allocated tips	
d Control number			9		10 Dependent care benefits	
e Employee's first name and initial		Last name	Suff.	11 Nonqualified plans		
f Employee's address and ZIP code				13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12a
				14 Other		12b
						12c
						12d
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement
 Copy 1 – For State, City, or Local Tax Department

2020

Department of the Treasury – Internal Revenue Service

Enter in "W-2 Box 14". Only enter an amount listed as "Housing or Living Allowance", and include the total amount listed.

Enter in "W-2 Boxes 12a-12d" box. The **only** amounts that should be included are ones associated with the following codes: D (*not* DD), E, F, G, H, S.