

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

Student Financial Services

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SPU.EDU/SFS

2022 - 2023 PARENT INCOME AND TAX FILER STATUS FORM

Note: FAFSA applicants must submit tax information from two years prior—in this case, 2020.			
SECTION ONE: Tax Filer Status (che	ck the appropriate box below)		
☐ Check here if you will not file and are not re OR ☐ Check here if you have filed or will file a 20 OR ☐ Check here if you have been granted a tax to the check here.	20 U.S. Income Tax Return.		3 or Extension Approval.
SECTION TWO: Wages (W-2) (check the appropriate box below)			
☐ I/we did not work and had no income earneOR☐ I/we did work and earned W-2 income from	<u> </u>		
Please complete the table below using information found on your 2020 U.S. Income Tax Return and W-2 forms.			
IF YOU DID NOT FILE A 2020 TAX RETURN YOU MUST ATTACH YOUR W-2s TO THIS FORM			
Parent(s)' Name on W-2 (Box e)	W-2 Box 1 Amount	W-2 Boxes 12a-12d (only codes <u>D</u> * (*not DD), E, F, G, H, & S) Total Amount	W-2 Box 14 Housing or Living Allowance Total Amount
	\$	\$	\$
	\$	\$	\$
	\$	\$ \$	\$
OR If you did not receive a W-2, but did work in 2020 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 2020 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 <u>2020</u> U.S. Income Tax Return Form 1040:			
Name of Farm Owner: Amount of Income Reported: \$			
By signing this verification statement, I attest the asked, I agree to submit documentation support			st of my knowledge. If
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	