

<b>Student Name</b>	<b>ID#</b>
---------------------	------------

Please complete form in blue or black ink. Incomplete forms will not be accepted

**IMPORTANT:** *There was a discrepancy found between what you reported on your FAFSA and what was reported on other documents. Per federal regulations, we are required to clarify the conflicting information.*

**IF YOU HAVE SPECIAL TAX FILING CIRCUMSTANCES,** check the appropriate box below and submit the required documents:

**1. Your FAFSA indicated that you filed an Amended IRS Income Tax Return.**

If you did file an amended IRS Income Tax Return for tax year 2015, provide the following documents:

- A **2015 IRS Tax Return Transcript; AND**
- A signed copy of the **2015 IRS Form 1040X**, "Amended U.S. Individual Income Tax Return," that was filed with the IRS

If you did NOT file an amended tax return:

- I, the student and/or spouse, made an error and **DID NOT file an Amended IRS Income Tax Return (1040X)** for 2015.

**2. You filed a Non-IRS (Foreign) Income Tax Return** -If an individual filed a tax return from: Canada, Puerto Rico, another U.S. territory (e.g., Guam, American Samoa, the U.S. Virgin Islands, the Northern Marianas Islands), or another foreign country not listed, provide the following:

- A signed copy of the non-IRS or foreign 2015 income tax return(s); **AND**
- Wage statement from all sources of income

**3. You, or your spouse, were Victims of IRS Identity Theft** - A victim of IRS identity theft who is not able to obtain a 2015 IRS Tax Return Transcript or use the IRS DRT must contact the IRS at 1-800-908-4490. Upon authentication of the tax filer's identity, the IRS will provide, by U.S. Postal Service, a printout of the tax filer's 2015 IRS income tax return information (TRDBV). You must provide the following:

- A copy of the Tax Return Database View (TRDBV) transcript or IRS equivalent; **AND**
- A signed statement by the tax filer indicating he/she was a victim of IRS tax-related identity theft.

**ONCE ALL REQUIRED DOCUMENTATION HAS BEEN COMPLETED AND SUBMITTED, YOUR INFORMATION WILL BE REVIEWED.**

**CERTIFICATION and SIGNATURES**

Each person signing below certifies that all of the information reported is complete and correct. The student and spouse (if married) must sign and date.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>Internal use ONLY</b> Reviewed: _____ Scanned: _____
---

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

<b>RETURN FORM AND SUPPORTING DOCUMENTATION TO:</b> <b>Lake Superior State University</b> <b>Financial Aid Office</b> <b>650 West Easterday Avenue</b> <b>Sault Ste. Marie, MI 49783-1699</b> <b>Phone: 906-635-2678</b> <b>Fax: 906-635-6669</b>
---