

Student Name _____	ID# _____	
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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 parent, 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 _____

Parent's Signature _____ Date _____

Internal use ONLY Reviewed: _____ Scanned: _____

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.
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RETURN FORM AND SUPPORTING DOCUMENTATION TO: Lake Superior State University Financial Aid Office 650 West Easterday Avenue Sault Ste. Marie, MI 49783-1699 Phone: 906-635-2678 Fax: 906-635-6669
