



The Authority on Financial Aid

# 2021-2022 Financial Aid Application Procedures for Students Selected for Verification

**Verification:** A process in which students and/or parents provide proof that the information reported on the FAFSA is accurate.

## 2019 Tax Year

**Note: Personal copies of your federal tax return are not accepted.**

**✓ SUBMIT**

### 2019 IRS Tax Return Transcript

**Internal Revenue Service**  
United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 03-04  
Response Date: 03-04  
Tracking Number: 10000070432

#### Tax Return Transcript

SSN Provided: \_\_\_\_\_  
Tax Period Ending: **Dec. 31, 2019**

The following items reflect the amount as shown on the return (PR), and the amount as adjusted (PC), if applicable. They do not show subsequent activity on the account.

SSN: 000-00-0100      SPOUSE SSN: 000-00-0200  
NAME(S) SHOWN ON RETURN: JOHN DOE & JANE DEE  
ADDRESS: 390 ANYSTREET BLVD  
DALLAS, TX 77000-0000-000

FILING STATUS: Married Filing Joint  
FORM NUMBER: 1040  
CYCLE POSTED: 20091408  
RECEIVED DATE: \_\_\_\_\_  
REMITTANCE: 0.00  
EXEMPTION NUMBER: 5  
DEPENDENT 1 NAME CTRL: ABGR  
DEPENDENT 1 SSN: 000-00-0300  
DEPENDENT 2 NAME CTRL: ABGS  
DEPENDENT 2 SSN: 000-00-0400  
DEPENDENT 3 NAME CTRL: ABGS  
DEPENDENT 3 SSN: 000-00-0500  
DEPENDENT 4 NAME CTRL: \_\_\_\_\_  
DEPENDENT 4 SSN: \_\_\_\_\_  
PREPARER SSN: \_\_\_\_\_  
PREPARER EIN: \_\_\_\_\_

**Income**

WAGES, SALARIES, TIPS, ETC:	\$ 67,000.00
TAXABLE INTEREST INCOME: SCH B:	\$ 0.00
TAX-EXEMPT INTEREST:	\$ 0.00
ORDINARY DIVIDEND INCOME: SCH B:	\$ 0.00
QUALIFIED DIVIDENDS:	\$ 0.00
REFUNDS OF STATE/LOCAL TAXES:	\$ 0.00
ALIMONY RECEIVED:	\$ 0.00
BUSINESS INCOME OR LOSS (Schedule C):	\$ 0.00
BUSINESS INCOME OR LOSS: SCH C PER COMPUTER:	\$ 0.00
CAPITAL GAIN OR LOSS: (Schedule D):	\$ 0.00
CAPITAL GAINS OR LOSSES: SCH D PER COMPUTER:	\$ 0.00
OTHER GAINS OR LOSSES (Form 4797):	\$ 0.00
TOTAL IRA DISTRIBUTIONS:	\$ 0.00
TAXABLE IRA DISTRIBUTIONS:	\$ 0.00

**✗ DO NOT SUBMIT**

### IRS Form 1040

**1040** Department of the Treasury - Internal Revenue Service (99) **2019**OMB No. 1545-0047 (85) Use Only - Do not write or staple in this space.

**Filing Status**  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Your first name and middle initial \_\_\_\_\_ Last name \_\_\_\_\_ Your social security number \_\_\_\_\_

Home address (number and street), if you have a P.O. box, see instructions. \_\_\_\_\_ Apt. no. \_\_\_\_\_

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). \_\_\_\_\_

Foreign country name \_\_\_\_\_ Foreign province/state/country \_\_\_\_\_ Foreign postal code \_\_\_\_\_

**Standard Deduction**  Spouse itemizes on a separate return or you were a dual-status alien  You as a dependent  Your spouse as a dependent

**Age/Blindness** Yes:  Were born before January 2, 1955  Are blind  Spouse:  Was born before January 2, 1955  Is blind

**Dependents** (see instructions): (1) First name \_\_\_\_\_ Last name \_\_\_\_\_ (2) Social security number \_\_\_\_\_ (3) Relationship to you \_\_\_\_\_ (4)  If qualifies for credit for other dependents

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1
2a	Tax-exempt interest	2b
2b	Qualified dividends	3b
3a	IRA distributions	3b
4a	Pensions and annuities	4b
5	Social security benefits	5b
6	Capital gain or loss. Attach Schedule D if required. If not required, check here	6
7a	Other income from Schedule 1, line 9	7a
7b	Add lines 1, 2a, 2b, 3a, 4b, 5b, 6, and 7a. This is your total income	7b
8a	Adjustments to income from Schedule 1, line 22	8a
8b	Subtract line 8a from line 7b. This is your adjusted gross income	8b
9	Standard deduction or itemized deductions (from Schedule A)	9
10	Qualified business income deduction. Attach Form 8995 or Form 8995-A	10
11a	Add lines 9 and 10	11a
11b	Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-	11b

For Disclosure, Privacy Act, and Paperwork Reduction Act Notices, see separate instructions. Cat. No. 112008 Form 1040 (2019)

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12a	Tax (see instructions). Check if any from Form(s) 1 8814 2 4872 3	12a
b	Add Schedule 2, line 3, and line 12a and enter the total	12b
13a	Child tax credit or credit for other dependents	13a
b	Add Schedule 3, line 7, and line 13a and enter the total	13b
14	Subtract line 13b from line 11b. If zero or less, enter -0-	14
15	Other taxes, including self-employment tax, from Schedule 2, line 10	15
16	Add lines 14 and 15. This is your total tax	16
17	Federal income tax withheld from Forms W-2 and 1099	17
18	Other payments and refundable credits:	18a
a	Earned income credit (EIC)	18b
b	Additional child tax credit. Attach Schedule 8812	18c
c	American opportunity credit from Form 8863, line 8	18d
d	Schedule 3, line 14	18e
e	Add lines 18a through 18e. These are your total other payments and refundable credits	18f
19	Add lines 17 and 18f. These are your total payments	19
20	If line 19 is more than line 16, subtract line 19 from line 16. This is the amount you overpaid	20
21a	Amount of line 20 you want refunded to you. If Form 8888 is attached, check here	21a
b	Routing number	21b
c	Account number	21c
d	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	21d
22	Amount of line 20 you want applied to your 2020 estimated tax	22
23	Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions	23
24	Estimated tax penalty (see instructions)	24

**Refund You Owe** 21a 21b 21c 21d 22 23 24

**Third Party Designee** Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions.  Yes, Complete below.  No

**Sign Here** Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

**Paid Preparer Use Only** Preparer's name \_\_\_\_\_ Phone no. \_\_\_\_\_ Date \_\_\_\_\_ PTIN \_\_\_\_\_ Check if:  3rd Party Designee  Self-employed

Details on ordering an IRS Tax Return Transcript: [www.hesaa.org/Documents/RequestIRSTRT.pdf](http://www.hesaa.org/Documents/RequestIRSTRT.pdf)

Order an IRS Tax Return Transcript online: [www.irs.gov](http://www.irs.gov)

Order an IRS Tax Return Transcript by phone: 1-800-908-9946