



Verification of Income for Student Non-Tax Filers 2017-2018

For Office Use Only:	
Checklist Item:	9VIS18
COMMKEY	9VIS

Student's Name: Last First M.I.

Stony Brook ID#

Address: (number, street, city, state, zip)

Student's phone number

The instructions and certifications below apply to the student and spouse (if married). Complete this section if you and/or your spouse (if married) will not file and ***are not required** (see table below) to file a 2015 income tax return with the IRS. Submit this completed and signed form along with all W-2 forms. **Student must check one box:**

- Both Student and Spouse (if married) were not employed, nor had income earned from work in 2015.
- Student and/or Spouse (if married) were employed in 2015 and have listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is provided. [Provide copies of all 2015 IRS W-2 forms issued by the employers]. List every employer even if the employer did not issue an IRS W-2 form.

List Name of Employee (Student/Spouse)	Source of income (Employer's Name)	W-2 Provided? Yes/No	Annual Amount Earned in 2015
(sample) Student name	ABC Auto Body Shop	Yes	\$3,600
			\$
			\$
			\$
			\$
Total Amount of Income Earned From Work			\$

If a W-2 employee wage and earning statement is not provided for each source of income explain below:

Certification and Authorization: Do NOT submit this form without **All** required signatures. By signing this form, I certify that all the information reported is complete and correct.

Student's Signature (Required) _____
Date

Parent Signature (Required for Dependent Students Only) _____
Date

Print and sign this form before submitting, electronic signature are not acceptable
For secure and faster processing, submit this form via the 'Upload Process' located on your SOLAR To Do List

Or

Mail or fax all documents to the appropriate financial aid department listed below

School of Nursing, Social Welfare, Health Technology and Management Health Sciences Office of Student Services Health Sciences Tower Level 2, Room 271 Stony Brook, NY 11794-8276 phone 631-444-2111 fax 631-444-6035	All Other Students Office of Financial Aid and Scholarship Services Room 180 Administration Building Stony Brook, NY 11794-0851 phone 631-632-6840 fax 631-632-9525
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*2015 Federal Income Tax Filing Requirements			
For most people, a tax return must be filed with the IRS if their 2015 income was at least:			
This information is from irs.gov. Amounts listed are for people under the age of 65 If you are over 65, please visit the IRS website.	Self-Employment Income (includes a trade or business as a sole proprietor, independent contractor, member of partnership, if you are in business for yourself in any other way)		\$400 or more (net earnings)
	Single dependent student (parents or someone else can claim you as a dependent)	\$6,300 (earned income)	Married, filing separately \$4,000 (gross income)
	Single, if claiming self	\$10,300 (gross income)	Head of Household \$13,256 (gross income)
	Married, filing joint return	\$20,600 (gross income)	Qualifying Widow(er), with dependent child \$16,600 (gross income)