2016-2017
Parent Tax Extension Filer Form

Please Use Black or Blue Ink

Student Name:                                                            OSU Banner ID
("A" plus 8 digits)

This form should be completed by the parent of a dependent student who 1) has been required by this office to provide 2015 federal income tax information and 2) is unable to provide an IRS Tax Return Transcript or use the IRS DRT process to submit actual tax filing information to the FAFSA. The OSU Office of Scholarships and Financial Aid is required by federal regulation to verify that information. In order for the verification process to be completed, this form along with IRS 2015 Form 4868 and all 2015 W2 forms for the parent(s) who were listed on the student’s 2016-2017 FAFSA must be submitted.

Please complete the section(s) below, following the instructions provided. No determination of aid eligibility or disbursement of funds can be made until all requested documents are received and reviewed.

Complete the appropriate information for the parent(s) who were listed on the student’s 2016-2017 FAFSA. Self-employment income includes income from both business and farm income which would be reported on lines 12 and 18 of the federal 1040 form. Adjusted Gross Income should be the tax filer’s best available information and should include all amounts which will make up the AGI on their actual or anticipated 1040, 1040A or 1040EZ form.

Do not leave an answer blank. If the response is zero, check the “None” box.

<table>
<thead>
<tr>
<th>Amount</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father/Stepfather Self-Employment Income from Business and/or Farm (if any)</td>
<td>$</td>
</tr>
<tr>
<td>Mother/Stepmother Self-Employment Income from Business and/or Farm (if any)</td>
<td>$</td>
</tr>
<tr>
<td>Adjusted Gross Income</td>
<td>$</td>
</tr>
</tbody>
</table>

Certification/Signature:

By signing this form, I/we certify that all the information reported to qualify for federal student aid is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Father’s/Stepfather’s Signature (electronic signature not acceptable) Date

Father’s/Stepfather’s Printed Name Street Address City State Zip

Mother’s/Stepmother’s Signature (electronic signature not acceptable) Date

Mother’s/Stepmother’s Printed Name Street Address City State Zip

Student’s Signature (electronic signature not acceptable) Date

Return To:
OSU Office of Scholarships and Financial Aid
119 Student Union, Stillwater, OK  74078-5061
Email: finaid@okstate.edu
Phone: (405) 744-6604
http://financialaid.okstate.edu
FAX:  (405) 744-6438

(If you fax this document, please don’t mail it)