

**State Grant and Special Programs**

Dear Student:

Please read the following information carefully to determine what action, if any, to take.

WHY WE ARE CONTACTING YOU

Earlier this year the Pennsylvania Higher Education Assistance Agency (PHEAA) honored your request for special consideration due to a change in your (or your spouse's, if married) employment status.

WHAT THIS MEANS TO YOU

Your 2020-21 Fall term State Grant eligibility was based on your initial 2020 taxed and untaxed income estimates which you provided earlier in the year.

The Agency must now confirm your income estimates prior to processing your application for the final term(s). It is critical that you respond with the requested information. If you do not respond, PHEAA will not further process your 2020-21 State Grant application. Failure to do so may affect the processing of any State Grant applications you (and your family) may file in future academic years.

WHAT ACTIONS YOU NEED TO TAKE

Complete, sign with all of the appropriate signatures, and return the form.

Mail documentation to: PHEAA
PO Box 8157
Harrisburg, PA 17105-8157

Please note that no information can be accepted after April 1, 2021. If this email was sent after March 1, 2021, you MUST respond within 30 days for your information to be considered.

OTHER INFORMATION YOU MAY FIND HELPFUL

You may be eligible for special consideration in other financial aid programs due to the 2020 income reduction. If you have not already done so, you may wish to contact the financial aid administrator at your school for additional information on other programs.

The current status of your State Grant may be viewed on pheaa.org using the Secure Sign-In for Account Access. This website provides you online 24/7 access to your State Grant information. If you have questions concerning this inquiry, PHEAA staff is available at 1-800-692-7392 (TTY: Dial 711 for hearing impaired). When calling, please be prepared to provide either your account number or your Social Security Number.

State Grant & Special Programs

Enclosure – 20B85B



**OCTOBER VERIFICATION FORM
(INDEPENDENT STUDENT)**

(NOTE: Deadline for returning this form to PHEAA is April 1, 2021.)

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Student's Social Security Number

OR

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Student's Account Number
2020-21

Print Student's Name _____

Complete the sections below, have the appropriate person(s) sign the form, and return the form to PHEAA, P.O. Box 8157, Harrisburg, PA 17105-8157 within 30 days. **Do not leave any of the questions blank, IF NONE, ENTER ZEROS. Failure to complete the form in its entirety will result in the form being returned or additional verification and/or clarification may be requested.** The Agency will also take the necessary steps to prevent any further processing of your State Grant application and could result in delaying the disbursement of funds that you may be eligible to receive. **DO NOT PROVIDE WEEKLY OR MONTHLY AMOUNTS, ONLY YEARLY TOTALS. If you are unable to estimate the total income your family will receive from January 1, 2020 until December 31, 2020, at this time, keep this form until you can provide an accurate estimate.** If this form is not received prior to December 31, 2020, you must submit a complete copy (as filed with IRS) of your and your spouse's (if married) 2020 U.S. Income Tax Return(s) prior to April 1, 2021.

1. Enter the total gross taxed income (prior to deductions, adjustments or exemptions) you and your spouse, if married, expect to receive **from January 1, 2020 until December 31, 2020**, from each of the sources below.

	<u>Student's Yearly Taxed Income</u>	<u>Spouse's Yearly Taxed Income</u>
a. Wages, salaries, tips	\$ _____	\$ _____
b. Severance pay	\$ _____	\$ _____
c. Taxable portions of pensions, annuities, 401(K), and/or IRA distributions	\$ _____	\$ _____
d. Taxable portions of interest and dividend income	\$ _____	\$ _____
e. Business or farm income	\$ _____	\$ _____
f. Capital gains	\$ _____	\$ _____
g. Income from rents received after expenses paid for mortgage interest, taxes, and insurance	\$ _____	\$ _____
h. Alimony which will be received	\$ _____	\$ _____
i. Unemployment Compensation (State and/or SUB)	\$ _____	\$ _____
j. Taxable portions of all Social Security benefits received	\$ _____	\$ _____
k. Any other taxed income	\$ _____	\$ _____
Total 2020 <u>Gross Taxed</u> Income	\$ _____	\$ _____

2. Enter the total amount of untaxed income you and your spouse, if married, expect to receive **from January 1, 2020 until December 31, 2020**, from each of the sources below. Do not include any income reported in Section 1.

	<u>Student's Yearly Untaxed Income</u>	<u>Spouse's Yearly Untaxed Income</u>
a. Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts which would be reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H, and S	\$ _____	\$ _____

Student's Yearly
Untaxed Income

Spouse's Yearly
Untaxed Income

b. IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans	\$ _____	\$ _____
c. Child support received for all children	\$ _____	\$ _____
d. Tax exempt interest income	\$ _____	\$ _____
e. Untaxed portions of pension and IRA distributions	\$ _____	\$ _____
f. Housing, food and other living allowances paid to members of the military (excluding on-base housing or housing allowances), clergy and others (including cash payments and cash value of benefits)	\$ _____	\$ _____
g. Veterans' noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances	\$ _____	\$ _____
h. Other untaxed income not reported elsewhere, such as workers' compensation, disability, etc. Do not include Social Security	\$ _____	\$ _____
i. Money received or paid on your family's behalf (e.g. bills, living/college expenses, etc.) not reported elsewhere on this form	\$ _____	\$ _____
Total 2020 <u>Untaxed</u> Income	\$ _____	\$ _____

3. If the revised 2020 gross taxed income estimate is higher than or less than the initial 2020 gross taxed income estimate, you must provide an explanation for the difference. It is very important that you include date(s) of change in employment status and the date(s) of receipt of additional income or distributions or of the loss of income.

4. If the revised 2020 untaxed income estimate is higher than or less than the initial 2020 untaxed income estimate, you must provide an explanation for the difference. It is very important that you include date(s) of change in employment status and the date(s) of receipt of additional income or distributions or of the loss of income.

5. If your family had a taxable distribution from a pension, annuity, IRA or 401(K) account during 2020, provide a breakdown of what these funds were used for.

The Agency will verify the accuracy of the financial data submitted on this form. If any review discloses a substantial discrepancy between your estimated and your actual 2020 income, the Agency will seek repayment of any Pennsylvania State Grant funds for which you were not entitled.

THE PENALTY FOR SUBMISSION OF FRAUDULENT INFORMATION ON THIS FORM MAY BE REPAYMENT OF TRIPLE ANY AMOUNT OF MONEY RECEIVED PLUS A FINE AND/OR IMPRISONMENT.

Signature of Student

Date

Signature of Spouse (if married)

Date

