For the year Jan. 1-D	ec. 31, 201	3, or other tax year beginni	ng		, 2013, 6		, 20				ot write or staple in thi eparate instructi	
Your first name and	d initial		Last name	1		*****	•				social security nur	
If a joint return, spo	Last name						1	Spouse's social security numbe				
			-								1 1	
Home address (nur	mber and	street). If you have a P.C). box, see instr	uctions.				Apt. no	i.	▲ M	ake sure the SSN(s	above
											nd on line 6c are c	
City, town or post off	fice, state,	and ZIP code. If you have a	ı foreign address,	also complete	spaces below (s	see instructions	i),			Presi	dential Election Car	moalon
									c		ere if you, or your spouse	Barrella M.
Foreign country na	me			Foreign pro	ovince/state/c	ounty	Fore	ign postal co			ant \$3 to go to this fund. low will not change your	
										fund.		Spouse
Eilina Status	3.1	Single				4 □ He	ad of house	hold (with a	ıalifvin	a ner	son). (See instructio	Control of the Control
Filing Status	2	☐ Married filing join	tly (even if on	ly one had in	come)						your dependent, en	
Check only one	3	☐ Married filing sep	and the second of the second o	网络克里斯 医皮肤神经炎 化氯苯酚			ild's name h	Appendix for the first form	North Park	Transfer,)	
box.		and full name her		•	(A) (A)	5 ∏ Qı	ualifying wid	dow(er) witi	ı depe	ender	nt child	
Exemptions	6a	☐ Yourself. If som	neone can cla	im you as a	dependent.		27,000,000,000,000				oxes checked	<u>en de anas</u> Se deserra
Exemptions	b	Spouse									n 6a and 6b	4
	C	Dependents:		(2) Dependent	's (3)	Dependent's		hild under ag			lo, of children in 6c who:	
	(1) First	name Last na	ame S	ocial security nur	nber relat	ionship to you	qualifying for child tax (see instructions		redit		lived with you did not live with	ij Samera i
	N.									У	ou due to divorce r separation	
If more than four											see instructions)	<u> </u>
dependents, see instructions and	7					······				D	ependents on 6c ot entered above	
check here 🕨 🗌												
	d	Total number of exe	emptions clair	ned					• 1000		dd numbers on nes above ▶	<u> </u>
Income	7	Wages, salaries, tip	s, etc. Attach	Form(s) W-2	2				7	1		
HIOOHIC	8a	Taxable interest. At	ltach Schedul	e B if require	ed				8a	W.		1
	b	Tax-exempt interes	st. Do not inc	lude on line t	Ва	8b						
Attach Form(s) <i>N-</i> 2 here. Also	9a	Ordinary dividends.	Attach Sched	dule B if requ	ired				9a			
attach Forms	b	Qualified dividends 9b										
N-2G and	10	Taxable refunds, credits, or offsets of state and local income taxes							10			
1099-R if tax	11	Alimony received									<u></u>	
was withheld.	12									9		
	13	Capital gain or (loss). Attach Sch	edule D if rec	quired. If not	required, cl	neck here	▶ □	13			
f you did not get a W-2,	14	Other gains or (losses). Attach Form 4797						14				
see instructions.	15a	IRA distributions .		b Taxable amount								
	16a	Pensions and annuiti	es 16a									
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E										
	18	Farm income or (loss), Attach Schedule F							18			
	19	Unemployment compensation						19				
	20a	Social security benefit	its 20a			b Taxable a	amount .		20b			
	21	Other income. List ty				•••••			21			
<u></u>	22	Combine the amounts				21. This is yo	ur total inc	ome 🕨	22			
Adinatad	23	Educator expenses				23						
Adjusted	24	Certain business exper	nses of reservis	ts, performing	artists, and							
Gross		fee-basis government of	1776、李、林大家的李文学生的特别。	医乳蛋白 机多铁石 电电流调频管	化邻苯基苯酚 化双氯化氯化 医二氯	24						
ncome	25	Health savings acco	经产品 医大线 经外销 网络人名英格兰	in the complete the first of the complete th	. Attach Form 8889 .							
	26	Moving expenses. A	to the first term of the second of the	The second second second second	1. 10 1	26						
	27		Deductible part of self-employment tax			. Attach Schedule SE . 27						
	28	Self-employed SEP,				28					.	
	29	Self-employed healtl		grade the second of the first		29						
	30	Penalty on early with	The Control of the Co			30						
	31a	Alimony paid b Rec		▶ 31a						ĺ		
	32	IRA deduction										
	33	Student loan interest				33						
	34	Tuition and fees. Atta		and the second second							İ	
	35	Domestic production a				35						
	36	Add lines 23 through				•		•. •. •	36			
	37	Subtract line 36 from	ine 22. This	ls your adju	sted gross i	ncome .		. ▶	37	1		

Tax and	38	Amount from line 37 (adjusted gross incom	ne)			Pag
Credits	39a	Check ☐ You were born before Janua	医硫基化物 医多种原体 化硫酸二氢化物	☐ Blind. \ To	tal boxes	
		if: I Spouse was born before Jar				
itandard Deduction	b	If your spouse itemizes on a separate return				
or-	40	Itemized deductions (from Schedule A) or	your standar	d deduction (see	eft margin)	40
People who heck any	41	Subtract line 40 from line 38				41
ox on line 9a or 39b o r	42	Exemptions. If line 38 is \$150,000 or less, multipl				42
ho can be	43	Taxable income. Subtract line 42 from line				43
aimed as a ependent,	44	Tax (see instructions). Check if any from: a	医环状性 医结合性性 化硫酸银矿 经经济股份		The second secon	44
ee structions.	46	Add lines 44 and 45			· · · · · · · · · · · · · · · · · · ·	45
All others:	47	Foreign tax credit. Attach Form 1116 if requ			. The the term has a pure.	40
ingle or arried filing	48	Credit for child and dependent care expenses		Control of the contro		
parately, 3,100	49	Education credits from Form 8863, line 19				
arried filing	50	Retirement savings contributions credit.		ALCOHOLO BORRES		
intly or ualifying	51	Child tax credit. Attach Schedule 8812, if i		. 51		
idow(er), 12,200	52	Residential energy credits. Attach Form 569		. 52		
ead of	53	Other credits from Form: a 3800 b 880)1 c □	53		
ousehold, 3,950	54	Add lines 47 through 53. These are your to				54
	55	Subtract line 54 from line 46. If line 54 is mo				55
ther	56	Self-employment tax. Attach Schedule SE				56
axes	57	Unreported social security and Medicare ta	57			
	58	Additional tax on IRAs, other qualified retirem	nie war ekstel telebrack kinebi			58
	59a	Household employment taxes from Schedule				59a
	b	First-time homebuyer credit repayment. Attac				59b
	60	Taxes from: a Form 8959 b Form 89				60
	61	Add lines 55 through 60. This is your total to Federal income tax withheld from Forms W		And the American Control of the Control of the American Control	· · · · · · · · · · · · · · · · · · ·	61
ayments	62 63	2013 estimated tax payments and amount appl	化双柱 经特别的证券 化异型抗原物	62 eturn 63		-
you have a	64a	Earned income credit (EIC)	180 (10)11 2012 I	64a		-
alifying	Ъ	Nontaxable combat pay election 64b	* * * * * * * * * * * * * * * * * * * *	1		-
ild, attach hedule EIC.	65	Additional child tax credit, Attach Schedule 88	312	65		
	66	American opportunity credit from Form 886		. 66		
	67	Reserved		67	0.00	
	68	Amount paid with request for extension to fi	le	68	The Carting Control of	
	69	Excess social security and tler 1 RRTA tax wit		69		
	70	Credit for federal tax on fuels. Attach Form	4136	70		
	71	Credits from Form: a 2439 b Reserved c] 8885 d □	71		
	72	Add lines 62, 63, 64a, and 65 through 71. The				72
efund	73	If line 72 is more than line 61, subtract line				73
	74a	Amount of line 73 you want refunded to you	u. If Form 888			74a
ect deposit?	> b	Routing number		Che: Che	cking 🔲 Savings	
e j tructions.	>_d	Account number				
nount	75 76	Amount of line 73 you want applied to your 20 Amount you owe. Subtract line 72 from line				
u Owe	175.15.1				ee Instructions	76
	77	Estimated tax penalty (see instructions) you want to allow another person to discuss			l l	
ird Party		A. 1916 (1916) 1916 (1916) - 1916		n the IHS (see Inst	ructions)? Yes	s. Complete below. No
signee	(1) 自由自由的特殊的。	lgnee's e ▶	Phone no. ▶		Personal Identif	ication
gn	Service and Control	er penalties of perjury, I declare that I have examined the		omoanvina schedulee	number (PIN)	he hest of my boowledge and half-t
ere	they	are true, correct, and complete. Declaration of prepare	arer has any knowledge.			
	You	r signature	Daytime phone number			
t return? See uctions.						
p a copy for	Spo	use's signature. If a joint return, both must sign.	Date	Spouse's occupation	on	If the IRS sent you an Identity Protection
r records.	<u> </u>					PIN, enter it here (see inst.)
id	Prin	Print/Type preparer's name Preparer's signature			Date	PTIN
eparer	Ų.					Check if self-employed
	-	Firm's name ▶				
e Only	Firm	S name			Firm's EIN ►	

Form **8879**

IRS e-file Signature Authorization

OMB No. 1545-0074

2013

Department of the Treasury Internal Revenue Service

▶ Do not send to the IRS. This is not a tax return.
 ▶ Keep this form for your records.
 ▶ Information about Form 8879 and its instructions is at www.irs.gov/form8879.

Submis	ssion Identification Number (SID)								
Taxpayer'	's name	Social security number	Social security number						
Spouse's	name	Spouse's social security	rity number						
Part I	Tax Return Information—Tax Year Ending De	cember 31, 2013 (Whole Dollars Only)							
	Adjusted gross income (Form 1040, line 38; Form 1040A, li		1						
	Total tax (Form 1040, line 61; Form 1040A, line 35; Form 16		2						
	Federal income tax withheld (Form 1040, line 62; Form 104	•	3						
	Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040	4							
	Amount you owe (Form 1040, line 76; Form 1040A, line 45;		5						
Part I	Taxpayer Declaration and Signature Authoriz	ation (Be sure you get and keep a copy	of your return)						
in Part I originator reason for Agent to of my fed remain in Treasury date. I al answer in	ax year ending December 31, 2013, and to the best of my knowledg above are the amounts from my electronic income tax return. I cor r (ERO) to send my return to the IRS and to receive from the IRS (a) a cor any delay in processing the return or refund, and (c) the date of ar initiate an ACH electronic funds withdrawal (direct debit) entry to the deral taxes owed on this return and/or a payment of estimated tax, and full force and effect until I notify the U.S. Treasury Financial Agent to Financial Agent at 1-888-353-4537. Payment cancellation requests reliso authorize the financial institutions involved in the processing of inquiries and resolve issues related to the payment. I further acknowld income tax return and, if applicable, my Electronic Funds Withdrawal	nsent to allow my intermediate service provider, trans an acknowledgement of receipt or reason for rejection ny refund. If applicable, I authorize the U.S. Treasury a financial institution account indicated in the tax prepara do the financial institution to debit the entry to this acco- terminate the authorization. To revoke (cancel) a paym must be received no later than 2 business days prior in the electronic payment of taxes to receive confidential eledge that the personal identification number (PIN) be	smitter, or electronic return of the transmission, (b) the and its designated Financia ration software for paymen bunt. This authorization is to ent, I must contact the U.S to the payment (settlement) at information necessary to						
Taxpay	er's PIN: check one box only								
'n	I authorize	to enter or generate my PIN							
_	ERO firm name		r five numbers, but						
	as my signature on my tax year 2013 electronically filed in	ncome tax return. do no	ot enter all zeros						
	I will enter my PIN as my signature on my tax year 2013 entering your own PIN and your return is filed using the P	electronically filed income tax return. Check t Practitioner PIN method. The ERO must compl	his box only if you are ete Part III below.						
Your sig	gnature ►	Date ▶							
Spouse	e's PIN: check one box only								
	I authorize	to enter or generate my PIN							
	ERO firm name		ter five numbers, but						
	as my signature on my tax year 2013 electronically filed in		ot enter all zeros						
	I will enter my PIN as my signature on my tax year 2013 entering your own PIN and your return is filed using the P								
Spouse'	's signature ▶	Date ▶							
	Practitioner PIN Method Re	eturns Only—continue below							
Part III	Certification and Authentication—Practitioner	r PIN Method Only							
ERO's E	EFIN/PIN. Enter your six-digit EFIN followed by your five-di	ligit self-selected PIN. Do not ente	r all zeros						
he taxp	that the above numeric entry is my PIN, which is my sign payer(s) indicated above. I confirm that I am submitting this and Publication 1345, Handbook for Authorized IRS e-file	s return in accordance with the requirements	I income tax return for of the Practitioner PIN						
ERO's s	signature ▶	Date ▶							
		Form — See Instructions IRS Unless Requested To Do So	- Philip						

C EMPLOYER'S THE PI	ENNSYLVANIA ST	ATE UNIVERSITY	/ DMB No. 154		and Tay Ctata		ב.וחנ		
ADORESS & TOT JA	AMES M. ELLIOTT	12 DD	2,220	and Tax States		<u>- U J J</u>			
a Employee's social security no	RSITY PARK, PA			,	TO receipt) .	OLL NON (19 Loc. inc. tax 59.20		
t ====================================	PA 69-0233856	bEmployer's Identification no. 24-6000376	•						
1 Wages, tips, meals, other compens	2 Federal income tax withheld	3 Social security wages			TOTAL		50.00		
20,373.38 4 Social security tax withheld			TOTAL 59.2						
366.98	266 OG			name (e) and Em	ployee's address and ZIP c	ode (I)	<u> </u>		
7 Social security tips 8 Allocated tips 9 Advance EIC payment				-					
10 Dependent care benefits		13 Retirement plan	-						
16 Gross wages for state	17 State income tax withheld	18 Gross wages for focal			Retirement contributions	Cite-D	SU/charities		
5,919.00	181.72	5,919.00	ļ		nettrement contributions	GHS-PS	ou/cnarriies		
Unemployment compensation tax 4 , 14		Healthcare reimbursement	LST Tax		Travel meals	Union d	ues		
			5	2.00		<u></u> _			
							*S2032B		
4040.0	Foreign Daves	w/- IIO O					-		
Form 1042-S	roleigh Perso	n's U.S. Source	Income S	Subject 1	to Withholding	- 1 -	1545-0096 4		
Department of the Treasury Internal Revenue Service	AMENDED 3 Withholding		RATA BASIS			1	B for Recipien		
code	allowances	4 Net income	5 Tax rate	6 Exemption	7 Federal tax withheld	8 Withho other a	lding by gents		
	000 0	. 0	0.00	04					
9 Total withholding credit	10 Amount re	paid to recipient	14 Recipient's	ILS TIN If a	ny				
			SSN or			EIN	QI-EIN		
X EIN 24-60003	76	QI-EIN	15 Recipient's	foreign tax ic	lentifying number, if any	,	16 Country Code		
12a WITHHOLDING AGENT'S			17 Nonqualifie	d intermediary	's (NGi's) flow-through	entity's name	16 Country Code		
12b Address (number and stre	IA STATE UNIVERSI	TY	!				СН		
12c Additional address line (ro	om or suite no.)		19a NQI's/Flow-through entity's address (number and street) 19b Additional address line (room or suite no.)						
12d City or town, province or			19c City or town, province or state, and country, ZIP code or foreign postal code						
UNIVERSITY PARI	K, PA 16802	or foreign postal code				ode or foreign	postal code		
13a RECIPIENT'S name		13b Recipient code O1	20 NOI's/Entity	s U.S. TIN, if	any				
13c Address (number and stre	et)		21 PAYER'S nar	ne and TIN (if	different from withhold	ding agent's)			
13d Additional address line (ro	om or suite no.)		22 Recipient's						
13a City or town, province or	state, and country, ZIP or for	eign postal code	23 State income	tax withheld	24 Payer's state	iax ло. 25 N	ame of state		
	16~0331690 Dep	artment of the Treasury-Int	ernal Revenue Se	rvice		Eor	m 1042-S (2013)		
							1042 0(2013)		
Form 1042-S	Foreign Person	's U.S <mark>. S</mark> ource I	ncome Si	ibiect to	Withholding	OMB No. 15	- 45-0096		
Department of the Treasury Internal Revenue Service	☐ AMENDED	PRO-RA	ATA BASIS I	REPORTING	2013		for Recipien		
1 Income 2 Gross income code	3 Withholding	4 Net income		6 Exemption	7 Federal tax	8 Withhold			
	aliowances			code	withheld	other age	nts		
9 Total withholding credit	00 0 10 Amount repa	200	0.00	04	0				
	TO MINOUTH PAPE	id to recipient	14 Recipient's U. SSN or I			EIN	QI-EIN		
11 Withholding agent's EIN			15 Recipient's fo	reion tax ider	itifying number, if any				
X EIN 24-600037				•		16 Country Code			
THE PENNSYLVANT	A STATE UNIVERSIT	v	1/ Nonqualified	Intermediary's	(NQ)'s) flow-through en	lity's name	8 Country Code		
12b Address (number and street)	19a NQI's/Flow-th	rough entity's	address (number and stre	8t)				
12c Additional address line (roor	n or suite no.)		19b Additional add	iress line troom	or suite no.)		-		
12d City or town, province or s	tate, and country. ZIP code or								
UNIVERSITY PARK	PA 16802	toloign poster code	is city or town,	province or si	ate, and country, ZIP cos	ie or foreign po	stal code		
13a RECIPIENT'S name		13b Recipient code 2	0 NQI's/Entity's	U.S. TIN, if a	ту				
13c Address (number and street)		01			•				
4.54					ifferent from withholdin	g agent's}			
13d Additional address line (room			2 Recipient's ac	count number	(optional)	****			
13e City or town, province or s	tate, and country, ZIP or foreign	n postal code 2	3 State income t	ar withhold	124 Payar's state to				

FI FOLO		ECTED					
fileR'S name, street address, city foreign postal code, and telephone	or town, province or state, country, ZIP on number	qualified tuition and related	OMB No. 1545-1574				
Penn State - Bursar's Office		expenses	0040	Tuitio			
103 Shields Building University Park, PA 16802-120 (814) 865-6528		2 Amounts billed for qualified tuition and related expenses	2013		Statement		
		\$ 15,315.00	Form 1098-T				
FILER'S federal Identification no. 24-6000376	STUDENT'S social security number	3 If this box is checked, your e has changed its reporting me	ducational institution ethod for 2013	Copy B			
STUDENT'S name		4 Adjustments made for a prior year					
		\$ 0.00	\$ 28,565.00		This is important		
Street address (including apt. no.) City or town, province or state, coun	try, and ZIP or foreign postal code	6 Adjustments to scholarships or grants for a prior year	7 Checked if the amou box 1 or 2 includes amounts for an acade period beginning Jane	emlo	tax informatio and is bein furnished to th		
s,		\$ 0.00	March 2014 ➤		Service.		
Service Provider/Acct, No. (see instr	8 Check if at least half-time student	9 Checked if a graduate student	10 ins. contract reimb./r	efund	- 		
Form 1098-T (keep for your records)	www.irs.gov/form1098t	Denortment of the Tre	0000	Internal Davis Occio		

Instructions for Student

An eligible educational institution, such as a college or university in which you are enrolled, and an insurer who makes reimbursements or refunds of qualified tuition and related expenses to you must furnish this statement to you. You, or the person who can claim you as a dependent, may be able to claim an education credit on Form 1040 or 1040A, only for the qualified tuition and related expenses that were actually paid in 2013. To see if you qualify for the credit, and for help in calculating the amount of your credit, see Pub. 970, Tax Benefits for Education; Form 8863, Education Credits; and the Form 1040 or 1040A instructions.

Institutions may report either payments received during the calendar year in box 1 or amounts billed during the calendar year in box 2. The amount shown in box 1 or 2 may represent an amount other than the amount actually paid in 2013. Your institution must include its name, address, and information contact telephone number on this statement. It may also include contact information for a service provider. Although the filer or the service provider may be able to answer certain questions about the statement, do not contact the filer or the service provider for explanations of the requirements for (and how to figure) any education credit that you may claim.

Account number. May show an account or other unique number the filer assigned to distinguish your account.

Box 1. Shows the total payments received in 2013 from any source for qualified tuition and related expenses less any reimbursements or refunds made during 2013 that relate to those payments received during 2013.

Box 2. Shows the total amounts billed in 2013 for qualified tuition and related expenses less any reductions in charges made during 2013 that relate to those amounts billed during 2013.

Box 3. Shows whether your institution changed its method of reporting for 2013. It has changed its method of reporting if the method (payments received or amounts billed) used for 2013 is different than the reporting method used for 2012. You should be aware of this change in figuring your education credits. The credits are allowable only for amounts actually paid during the year and not amounts reported as billed, but not paid, during the year.

Box 4. Shows any adjustment made for a prior year for qualified tuition and related expenses that were reported on a prior year Form 1098-T. This amount may reduce any allowable education credit that you claimed for the prior year (may result in an increase in tax liability for the year of the refund). See "recapture" in the index to Pub. 970 to report a reduction in your education credit or tuition and fees deduction.

Box 5. Shows the total of all scholarships or grants administered and processed by the eligible educational institution. The amount of scholarships or grants for the calendar year (including those not reported by the institution) may reduce the amount of the education credit you claim for the year.

Box 6. Shows adjustments to scholarships or grants for a prior year. This amount may affect the amount of any allowable tuition and fees deduction or education credit that you claimed for the prior year. You may have to file an amended income tax return (Form 1040X) for the prior year.

Box 7. Shows whether the amount in box 1 or 2 includes amounts for an academic period beginning January-March 2014. See Pub. 970 for how to report these amounts,

Box 8. Shows whether you are considered to be carrying at least one-half the normal full-time workload for your course of study at the reporting institution.

Box 9. Shows whether you are considered to be enrolled in a program leading to a graduate degree, graduate-level certificate, or other recognized graduate-level educational credential.

Box 10. Shows the total amount of reimbursements or refunds of qualified tuition and related expenses made by an insurer. The amount of reimbursements or refunds for the calendar year may reduce the amount of any education credit you can claim for the year (may result in an increase in tax liability for the year of the refund).

Future developments. For the latest information about developments related to Form 1998-T and its instructions, such as legislation enacted after they were published, go to www.irs.gov/form1998t.

AMERICAN OPPORTUNITY and LIFETIME LEARNING TAX CREDITS 1098-T Supplemental Form

The following supplemental information is provided to assist you in identifying the educational expenses paid by you, or on your behalf, to Penn State during 2013. This Supplemental Form provides the payments made to your student account. It may assist you in calculating which expenses qualify for the tax credit on IRS Form 8863. Current students may also access a complete summary of their Student Account transactions on eLion by selecting Bursar Tuition Bills from the left-hand menu.

January 1 - December 31, 2013

Payments to Student Account

Amount

Loans and Payments

\$0.00

You may want to consult your tax advisor or available IRS guidance including Publication 970 (http://www.irs.gov/pub/irs-pdf/p970.pdf) and Form 8863 to assist you in calculating allowable Education Credits.

						OMB No. 1545-1574			
FILER'S name, street address, city, state, ZIP code, and telephone number			Payments received for q tuition and related exper		GORRECTED CORRECTED		(if checked)		
Penn State – Bursar's 103 Shields Building University Park, PA (814)865–6528	Office 16802-1200		\$ 2 \$	Amounts billed for qualific tuition and related expense 9 154.00	ed es	2013 Form 1098-T	Tuit Statem		
FILER'S Federal Identification no. STUDENT'S social security number 24-6000376				3 If this box is checked, your educational institution has changed its reporting method for 2013				Copy For St	
STUDENT'S name, street address (including apt. no.) city, state, and ZIP code				Adjustments made for a pr year Adjustments to scholarships or grants for a prior year	\$	5 Scholarships or grants 7530.C 7 Checked if the amount in box 1 or 2 includes ame for an academic period beginning January – March 2014		This is imp tax inforr and is furnished i Internal Re	mation being to the
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student	Х	9	Checked if a graduate student	х	10 ins. contract reimb./refun \$	d		

Form 1098-T

(Keep for your records.)

Department of the Treasury - Internal Revenue Service

Instructions for Student

An eligible educational institution, such as a college or university in which you are enrolled, and an insurer who makes reimbursements or refunds of qualified tuition and related expenses to you must furnish this statement to you, you, or the person who can claim you as a dependent, may be able to claim an education credit on Form 1040 or 1040A, only for the qualified tuition and related expenses that were actually paid in 2013. To see if you qualify for the credit, see Pub. 970, Tax Benefits for Education; Form 8863, Education Credits; and the Form 1040 or 1040A instructions.

Institutions may report either payments received during the calendar year in box 1 or amounts billed during the calendar year in box 2. The amount shown in box 1 or 2 may represent an amount other than the amount actually paid in 2013. Your institution must include its name, address, and information contact telephone number on this statement. It may also include contact information for a service provider. Although the filer or the service provider may be able to answer certain questions about the statement, do not contact the filer or the service provider may be able to answer certain questions about the statement, do not contact the filer or the service provider may be able to answer certain questions about the statement, do not contact the filer or the service provider may call may show only the last four digits of your social security number (SSN), individual taxpayer identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number to the IRS and, where applicable, to state and/or local governments.

Account number. May show an account or other unique number the filer assigned to distinguish your account.

Box 1. Shows the total amounts billed in 2013 from any source or refunds made during 2013 that relate to the amounts billed during 2013.

Box 2. Shows the total smounts billed during 2013 is different th

aware of this change in figuring your education credits. The credits are allowable only for amounts actually paid during the year and not amounts reported as billed, but not paid, during the year. Box. 4. Shows any adjustments made for a prior year for qualified tuition and related expenses that were reported on a prior year form 1098-T. This amount may reduce any allowable education credit that you claimed for the prior year fmay result in an increase in tax liability for the year of the refund. See "recapture" in the index to Pub. 970 to report a reduction in your education credit or tuition and fees deduction.
Box 5. Shows the total of all scholarships or grants administered and processed by the eligible educational institution. The amount of scholarships or grants for the calendar year lincluding those not reported by the institution may reduce the amount of the education credit you can claim for the year.
Box 6. Shows adjustments to scholarships or grants for a prior year. This amount may affect the amount of any allowable tuition and fees deduction or education credit that you claimed for the prior year, you may have to file an amended income tax return (Form 1040x) for the prior year.
Box 7. Shows whether the amount in box 1 or 2 includes amounts for an academic period beginning January-March 2014. See Pub. 970 for how to report these amounts.
Box 8. Shows whether you are considered to be carrying at least one half the normal full-time workload for your course of study at the reporting institution. If you are at least a half-time student for at least one academic period that begins during the year, you meet one of the requirements for the American opportunity credit. You do not have to meet the workload requirement to qualify for the lifetime learning credit.
Box 9. Shows whether you are considered to be enrolled in a program leading to a graduate level educational credential.
Box 10. Shows the total amount of reimbursements or refunds of qualified tuition and related expenses made by an insurer. The amo

AMERICAN OPPORTUNITY and LIFETIME LEARNING TAX CREDITS 1098-T Supplemental Form

The following supplemental information is provided to assist you in identifying the educational expenses paid by you, or on your behalf, to Penn State during 2013. This Supplemental Form provides the payments made to your student account. It may assist you in calculating which expenses qualify for the tax credit on IRS Form 8863. Current students may also access a complete summary of their Student Account transactions on eLion by selecting Bursar Tuition Bills from the left-hand menu.

January 1 - December 31, 2013

Payments to Student Account

Amount

PAYMENTS/LOANS

1449.00

You may want to consult your tax advisor or available IRS guidance including Publication 970 (http://www.irs.gov/pub/irs-pdf/p970.pdf) and Form 8863 to assist you in calculating allowable Education Credits.