

2011-2012 ADDITIONAL FINANCIAL INFORMATION FORM

Student's Name _____

SSN/ID _____

STUDENT/SPOUSE

PARENT(S)

Enter the annual combined 2010 amounts for you and your spouse.

ADDITIONAL FINANCIAL INFORMATION

Enter the annual combined 2010 amounts for your parent(s).

- | | | |
|--------------------------|--|--------------------------|
| <input type="checkbox"/> | a. Education credits (America Opportunity, Hope or Lifetime Learning tax credits) from IRS Form 1040—line 49 or 1040A—line 31. | <input type="checkbox"/> |
| <input type="checkbox"/> | b. Child support PAID because of divorce or separation or as a result of a legal requirement. Don't include support for children in your household, as reported in question 93. | <input type="checkbox"/> |
| <input type="checkbox"/> | c. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships. | <input type="checkbox"/> |
| <input type="checkbox"/> | d. Student grant and scholarship aid reported to the IRS in your adjusted gross income . Includes Americorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships. | <input type="checkbox"/> |
| <input type="checkbox"/> | e. Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Do not enter untaxed combat pay. | <input type="checkbox"/> |
| <input type="checkbox"/> | f. Earnings from work under a cooperative education program offered by a college. | <input type="checkbox"/> |

UNTAXED INCOME

- | | | |
|--------------------------|--|--------------------------|
| <input type="checkbox"/> | a. Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S. | <input type="checkbox"/> |
| <input type="checkbox"/> | b. IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040—line 28 + line 32 or 1040A—line 17. | <input type="checkbox"/> |
| <input type="checkbox"/> | c. Child support RECEIVED for any of your children. Don't include foster care or adoption payments. | <input type="checkbox"/> |
| <input type="checkbox"/> | d. Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b. | <input type="checkbox"/> |
| <input type="checkbox"/> | e. Untaxed portions of IRA distributions from IRS Form 1040—lines (15a minus 15b) or 1040A—lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here. | <input type="checkbox"/> |
| <input type="checkbox"/> | f. Untaxed portions of pensions from IRS Form 1040—lines (16a minus 16b) or 1040A—lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here. | <input type="checkbox"/> |
| <input type="checkbox"/> | g. Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing. | <input type="checkbox"/> |
| <input type="checkbox"/> | h. Veterans noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances. | <input type="checkbox"/> |
| <input type="checkbox"/> | i. Other untaxed income not reported in items 44a through 44h, such as worker's compensation, disability, etc., Also include the first-time homebuyer tax credit from IRS Form 1040 - line 67. Don't include student aid, earned income credit, additional child tax credit, welfare payments, untaxed social security benefits Supplemental Security Income, Workforce Investment Act educational benefit, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans) foreign income exclusion or credit for federal tax or special fuels. | <input type="checkbox"/> |
| <input type="checkbox"/> | j. Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form. | <input type="checkbox"/> |

Each person signing this form certifies that all the information reported on it is complete and correct.

Student's Signature

Date

Parent's Signature (if applicable)

Date