

Student Rocket Number

Student Last Name

Student First Name

()

Preferred Phone Number



**Student Untaxed
Income Worksheet
2009-10**

You were mailed this form to help the Office of Student Financial Aid clarify a conflict regarding information you reported on the Free Application for Federal Student Aid (FAFSA). The U.S. Department of Education requires us to resolve conflicting information, therefore, complete this worksheet and return it to our office so that we can continue processing your federal financial aid application.

If you were married as of the date that you filed your FAFSA, include your spouse's information on this worksheet.

REPORT AMOUNTS FOR CALENDAR YEAR 2008

Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on W-2 Form in boxes 12a through 12d, codes D, E, F, G, H, and S.	\$
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.	\$
Child support you received for all children. Don't include foster care or adoption payments.	\$
Tax exempt interest income from IRS Form 1040 – line 8b or 1040A – line 8b.	\$
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.	\$
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.	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	\$
Veterans' non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.	\$
Other untaxed income not reported elsewhere, such as workers' compensation, disability, etc. 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 benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.	\$
Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form.	\$

By signing this worksheet, I certify that all of the information reported above, used to determine eligibility for federal student financial aid, is complete and correct. **WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student Signature

Date

RETURN TO: **The University of Toledo**
Office of Student Financial Aid
2801 West Bancroft Street, Mail Stop 314 **Phone: 419.530.8700**
Toledo, Ohio 43606-3390 **Fax: 419.530.5835**