

Name \_\_\_\_\_

ID \_\_\_\_\_

**2009-10 Untaxed Income Clarification Form (Student)**

**Instructions:** On the 2009-10 Free Application for Federal Student Aid (FAFSA), you reported untaxed income in Question #47, **or** the question was left blank and the information is now required. Please complete this form in order to provide us with the information that was left blank, or confirm the untaxed income you reported on the FAFSA.

- Write a zero or “N/A” if you have no amount to report on a particular line.
- DO NOT leave any line blank.

**Question #47**  
*(Student)*

Enter the combined amounts for you and your spouse.

a. Payments to tax-deferred pension and saving plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H and S.	\$
b. IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040—total of lines 28 + 32 or 1040A—line 17.	\$
c. Child support you <b>received</b> for all children. Don't include foster care or adoption payments.	\$
d. Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b.	\$
e. Untaxed portions of IRA distributions from IRS Form 1040—lines (15a minus 15b) or 1040A—lines (11a minus 11b). Exclude rollovers. <b>If negative, enter a zero here.</b>	\$
f. Untaxed portions of pensions from IRS Form 1040—lines (16a minus 16b) or 1040A—lines (12a minus 12b). Exclude rollovers. <b>If negative, enter a zero here.</b>	\$
g. Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	\$
h. Veterans' non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.	\$
i. Other untaxed income not reported, such as workers' compensation, disability, etc. <b>Don't include:</b> 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.	\$
j. Money received, or paid on your behalf (e. g. bills), not reported elsewhere on this form.	\$
<b>Total for Student</b>	\$

**Statement of Certification: I certify that the above information is true and complete.**

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*