

SECTION B: STUDENT/SPOUSE 2017 TAX INFORMATION

Please list the total wages earned by you (and your spouse) in 2017:

| | Employer | Wages earned in 2017 |
|-----------------|----------|----------------------|
| Student: | | \$ |
| Spouse: | | \$ |

I/Spouse will file or have already filed a 2017 US Income Tax Return. Please attach a signed and dated copy of the 2017 federal tax return submitted to the IRS (or) student/spouse 2017 federal tax return transcript from the IRS. (See instructions included on our website under Financial Aid Verification Process)

I completed IRS Data Retrieval on the FAFSA form Date Completed _____

(OR)

(Must supply "IRS Non Tax Filing Letter" for any of the below situations)

I/Spouse was not employed in 2017, will not file, and am not required to file a 2017 US Income Tax Return

I/Spouse was employed in 2017, will not file, and am not required to file a 2017 US Income Tax Return
(You are required to attach all W-2(s) to this document.)

I/Spouse was the recipient of social security benefits in 2017. **(You are required to attach all 1099s)**

Child Support Paid check one box only:

I/Spouse **did not** pay child support in 2017.

I/Spouse **PAID** child support in 2017 due to a divorce or separation or as a result of a legal agreement

a) The amount of child support paid in 2017 \$ _____

b) The name(s) of the children for whom child support was paid in 2017 _____

c) The name and address of the person to whom the child support was paid _____

d) Signature of person that paid the child support in 2017 _____

**SECTION C: STUDENT/SPOUSE 2017 UNTAXED INCOME -
Do NOT leave any question blank.**

Did you receive any untaxed income in 2017?

STUDENT

SPOUSE

Sources of UNTAXED income

- | | <u>Yes</u> | <u>No</u> | <u>Amount</u> | <u>Yes</u> | <u>No</u> | <u>Amount</u> |
|---|--------------------------|--------------------------|---------------|--------------------------|--------------------------|---------------|
| • IRA deductions and plan contributions? <i>(SEP, SIMPLE, KEOGH)</i> | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ |
| • Tax-exempt interest income? | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ |
| • Untaxed IRA distributions? <i>(Exclude rollovers)</i> | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ |
| • Untaxed pension and annuity distributions? <i>(Exclude rollovers)</i> | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ |
| • Any <u>other</u> untaxed income in 2017? *Please specify source: _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ |
| • Cash support from relative or friend? | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ |

SECTION E: INCOME EXCLUSIONS

Yes No Amount Yes No Amount

- | | | | | | | |
|---|--------------------------|--------------------------|----------|--------------------------|--------------------------|----------|
| • Did you report any of your student financial aid as part of your adjusted gross income in 2017? <i>(Includes AmeriCorps awards, living allowances and interest accrual payments)</i> | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ | <input type="checkbox"/> | <input type="checkbox"/> | \$ _____ |
|---|--------------------------|--------------------------|----------|--------------------------|--------------------------|----------|

SECTION F: Statement of Certification:

You must sign this worksheet. By signing, you certify that the information given on this form is true and complete.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student Signature _____

Date _____

**Office of Student Financial Aid
101 Braddock Road, Frostburg, MD 21532
Phone: 301-687-4301 · Fax: 301-687-7074 · Email: fsufinaid@frostburg.edu
www.frostburg.edu/ungrad/faid/**