2012-2013

Untaxed Income - Student

Office of Scholarships and Financial Aid
Lucina Hall 245
Ball State University
Muncie, IN 47306-0880

Telephone # **(765) 285-5600**
Toll free # **(800) 227-4017**
FAX **(765) 285-4247**
TDD # **(765) 285-2202**
WWW **www.bsu.edu/finaid**

_____
Student's Name

_____
Student's I.D. Number

We have received the data from your Free Application for Federal Student Aid (FAFSA).
You must respond to all item(s) listed and supply the Office of Scholarships and Financial Aid with any requested documentation.

Enter all of the following that apply to you for calendar year 2011. Do not leave any item blank. If there was no income for the source listed, indicate zero.

$_____ 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.

$_____ 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 received for any of your children. Don't include foster care or adoption payments.

$_____ Tax exempt 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.

$_____ 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.

$_____ 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.

$_____ Veterans noneducation benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study Allowances.

$_____ Other untaxed income not reported above, such as workers' compensation, disability, etc. Also include the first-time homebuyer tax credit. 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, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements, 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.

Please return this form and any other requested documentation to:

BALL STATE UNIVERSITY, OFFICE OF SCHOLARSHIPS AND FINANCIAL AID,
MUNCIE, IN 47306. FAX #: (765) 285-4247

CERTIFICATION STATEMENT: You must read and sign this statement. I certify that all of the information provided on this letter and on any attached documentation is accurate and complete. If I purposely give false or misleading information, I may be fined $20,000, sent to prison, or both.

Student Signature _____ Date_____