

2018- 2019 Additional Financial Information for Independent Students

You are required to fill out this form to verify information provided on your 2018-2019 Free Application for Federal Student Aid or Dream Application. You and/or your spouse indicated that you may have additional financial information or untaxed income. **If a section does not pertain to you, please indicate zero or not applicable (N/A). Please keep in mind that incomplete forms will delay processing. Do not leave any spaces blank.**

SECTION 1: STUDENT INFORMATION

Last Name

First Name

Student Identification Number

SECTION 2: SPOUSE INFORMATION

Spouse Name *(if applicable)*

SECTION 3 : ADDITIONAL FINANCIAL INFORMATION OR UNTAXED INCOME FOR 2016 TAX YEAR

Report Annual Amounts Only.	Student/Spouse
Child support you 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 73 of the FAFSA or FAFSA or Question 77 of the Dream Act application.	\$
Taxable earnings from need-based employment programs, such as Federal Work-Study and need- based employment portions of fellowships and assistantships.	\$
Taxable student grant and scholarship aid reported to the IRS in your (or your spouses') adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$
Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Don't include untaxed combat pay.	\$
Earnings from work under a cooperative education program offered by a college.	\$
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 Form in Boxes 12a through 12d, codes D, E, F, G, H and S. Don't include amounts reported in code DD.	\$
Child support received for any of your children. Don't include foster care or adoption payments.	\$
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.	\$

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SECTION 3 : ADDITIONAL FINANCIAL INFORMATION OR UNTAXED INCOME FOR 2016 TAX YEAR

Report Annual Amounts Only.	Student/Spouse
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 in items 45a through 45h of the FAFSA or Dream Act Application, such as workers' compensation, disability benefits, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040—line 25. Don't include extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, 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 on special fuels.	\$ _____
Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent or other person whose financial information is not reported on the 2018-19 FAFSA OR 2018-2019 Dream Act Application and that is not part of a legal child support agreement.	\$ _____

SECTION 4: CERTIFICATION AND SIGNATURES

If you are the student or parent, by signing this application you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide further documentation that will verify the accuracy of your completed form. Also, you certify that you understand that the Department of Education has the authority to verify information reported on this form with the Internal Revenue Service and other federal agencies. If you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.

Student Signature

Date

Spouse Signature *(if applicable)*

Date

Scan and submit this form in PDF format **ONLY** and email to fadocs@ucr.edu.

Be sure to include your full name and SID in your email and on every page.