



BOWLING GREEN STATE UNIVERSITY

Student Financial Aid and Scholarships

Untaxed Income Clarification Form
2020-2021

The U. S. Department of Education requires the resolution of conflicting information prior to awarding federal financial aid. To clarify a conflict regarding information you reported or left blank on the Free Application for Federal Student Aid (FAFSA), please complete this form and return it using one of the ways listed at the bottom of the form.

Instructions: Complete each section below as indicated.

- Students required to report their parent's information on the FAFSA (dependent students), should complete Sections A, B, D and E.
Students who were not required to report their parent's information on the FAFSA (independent students), should complete Sections A, C, D and E.

Do NOT include any of the following sources of income when completing the charts below:

- Amount on W-2 Box 12a through 12d with code DD
Foster care or adoption payments
Extended foster care benefits
Student aid
Earned income credit
Additional child care tax credit
Welfare payments
Untaxed Social Security benefits
Supplemental Security Income
Workforce Innovation an 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
Credit for federal tax on special fuels
Pension or IRA distribution rollovers

A. STUDENT INFORMATION

Form with fields for Last Name, First Name, M. I., BGSU ID Number, Phone Number, and BGSU E-mail Address.

B. UNTAXED INCOME INFORMATION FOR 2018 - DEPENDENT STUDENTS

Table with 4 columns: Type of Income, Student, Parent 1, Parent 2. Rows include: Payments to tax-deferred pension and retirement savings plans, IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans, Child support received for any of your children, Tax exempt interest income from IRS Form 1040 - line 2a, Untaxed portions of IRA distributions and pensions from IRS Form 1040 line 4a minus line 4b, Housing, food and other living allowances paid to members of the military, clergy and others, Veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.

Type of Income	Student	Parent 1	Parent 2
Other untaxed income not reported above, such as worker's compensation, disability benefits, etc. If applicable, include the untaxed portion of health savings accounts (HSA) from IRS Form 1040 Schedule 1 – line 25.	\$	\$	\$
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 this form and that is not part of a legal child support agreement.	\$	NA	NA

C. UNTAXED INCOME INFORMATION FOR 2018 – INDEPENDENT STUDENTS

Type of Income	Student	Spouse
Payments to tax-deferred pension and retirement 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 Schedule 1 – total of lines 28 + 32.	\$	\$
Child support received for any of your children.	\$	\$
Tax exempt interest income from IRS Form 1040 – line 8b or 1040A – line 8b.	\$	\$
Untaxed portions of IRA distributions and pensions from IRS Form 1040 line 4a minus line 4b. 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).	\$	\$
Veteran's 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 above, such as worker's compensation, disability benefits, etc. If applicable, include the untaxed portion of health savings accounts (HSA) from IRS Form 1040 Schedule 1 – line 25.	\$	\$
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 this form and that is not part of a legal child support agreement.	\$	NA

D. SIGN THIS WORKSHEET

Each person signing this form certifies that all the information reported is complete and accurate. If you are a dependent, at least one parent must provide a signature and date. If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student _____

Date _____

Parent (of Dependent student) _____

Date _____

E. SUBMIT THIS WORKSHEET:

UPLOAD & SUBMIT completed SFA forms at: <http://sfa.bgsu.edu/upload>

FAX THIS WORKSHEET TO: 419-372-0404

If you chose the fax option, processing may be delayed as staff are working remotely.

HAVE QUESTIONS?

If you need assistance completing this form you may contact a financial aid advisor by calling 419-372-2651, M-F, 8:00 am – 5:00 pm.

Ask your question online using our secure web portal at: <https://sfa.bgsu.edu/asksfa>