

Student Name _____ Banner ID + _____

Student Email _____@MiamiOH.edu Phone # for questions about form: _____

PARENT INFORMATION: Provide the following information for the FAFSA Parent(s) utilizing the 2017 Federal Income Tax Return or W2.

List annual amounts for 2017: If no value, enter "\$0" on the line, do not leave blank.

UNTAXED INCOME	FAFSA PARENT(S) (If no value, enter \$0. Do not leave blank)
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 Form in Boxes 12a through 12d, codes D,E, F, G, H, and S. Do not include amounts reported in code DD (employer contributions toward employee health benefits).	\$
IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh, and other qualified plans from IRS Form 1040—line 28 + line 32 or 1040A—line 17.	\$
Child support received for any of the FAFSA parent's children. Do not include foster care or adoption payments.	\$
Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b.	\$
Untaxed portions of IRA distributions 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). Do not include the value of on-base military housing or the value of a basic military allowance for housing.	\$
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 elsewhere, such as workers' compensation, disability benefits, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040 – line 25. Do not 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 <i>flexible</i> spending arrangements (e.g. cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$

Please return this form to the One Stop:

Miami University - One Stop - 301 S. Campus Ave. - Oxford, OH 45056 513-529-0001

Email: OneStop@MiamiOH.edu - Fax: 513-529-8713 - Web: MiamiOH.edu/OneStop

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ADDITIONAL FINANCIAL INFORMATION	FAFSA PARENT(S) (If no value, enter \$0. Do not leave blank)
Education credits (American Opportunity and Lifetime Learning tax credits) from IRS Form 1040—line 50 or 1040A—line 33.	\$
FAFSA parent(s)' taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$
FAFSA parent(s)' taxable college grant and scholarship aid reported to the IRS as income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships.	\$
Combat pay or special combat pay. Only enter the amount that was taxable and included in the FAFSA Parent(s)' adjusted gross income. Do not include untaxed combat pay.	\$
Earnings from work under a cooperative education program offered by a college.	\$

CERTIFICATION: I certify that all information reported to qualify for federal student aid is complete and correct and that purposely giving false or misleading information may lead to fines, prison or both.

Student Signature (Original, not typed) Date _____
Parent Signature (Original, not typed) Date

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