

Student Name _____

Student Number _____

WORKSHEET B

A review of your FAFSA indicates that you and/or your parent(s) may have incorrectly posted additional financial information that is greater than your Adjusted Gross Income (AGI). Please complete and submit **Worksheet B** below so we can resolve the conflict on your FAFSA.

STUDENT/SPOUSE INFORMATION:

43. Student's 2019 Additional Financial Information (Enter the combined amounts for you and your spouse.)

- | | | | | | | | | | | | | |
|--|----|---|--|--|--|--|--|--|--|--|--|--|
| a. Education credits (American Opportunity Tax Credit and Lifetime Learning Tax Credit) from IRS Form 1040 Schedule 3—line 3. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| b. Child support 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 93. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| c. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| d. 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 and scholarship portions of fellowships and assistantships. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| e. 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. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| f. Earnings from work under a cooperative education program offered by a college. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |

PARENT INFORMATION:

91. Parents' 2019 Additional Financial Information (Enter the amounts for your parent[s].)

- | | | | | | | | | | | | | |
|--|----|---|--|--|--|--|--|--|--|--|--|--|
| a. Education credits (American Opportunity Tax Credit and Lifetime Learning Tax Credit) from IRS Form 1040 Schedule 3—line 3. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| b. Child support paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your parents' household, as reported in question 72. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| c. Your parents' taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| d. Your parents' 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 and scholarship portions of fellowships and assistantships. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| e. Combat pay or special combat pay. Only enter the amount that was taxable and included in your parents' adjusted gross income. Don't include untaxed combat pay. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |
| f. Earnings from work under a cooperative education program offered by a college. | \$ | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | | | | |
| | | | | | | | | | | | | |

I certify that the information entered above is true and correct.

Student Signature _____

Parent Signature _____

(if dependent student)