

AUGSBURG COLLEGE 2016 – 2017

EXPANDED INCOME VERIFICATION

Last Name: _____ First Name: _____

SSN: _____ Augsburg ID: _____

Phone #: _____

Have you completed a bachelor's degree? ☐ NO ☐ YES * IF YES, please check which degree type: ☐ BA or ☐ BSAre you a transfer student? ☐ NO ☐ YES High School Graduation or GED Completion Date: _____ / _____
Month Year (ex:2011)

Family Information – Complete the Table Below

If you were required to report your parent(s) information when completing the FAFSA, you are considered a **DEPENDENT** student and should include:

- **Yourself and your parent(s)** or step parent even if you don't live with your parents.
- Your siblings or parents' other children, even if they don't live with your parent(s).
If they do not live with your parent(s), only include them if your parent(s) will provide more than 50% of their support from July 1, 2016 until June 30, 2017.
- Other people if they live with your parent(s) and your parent(s) provide more than 50% of their support.

If you were **NOT** required to report your parent(s) information when completing the FAFSA, you are considered an **INDEPENDENT** student and should include:

- **Yourself** and your spouse if you have one.
- Your children if you provide more than 50% of their support.
- Other people if they live with you and you will provide more than 50% of their support from July 1, 2016 until June 30, 2017.

List Name of All Household Family Members (Attach additional sheets as needed)	Age	Relationship to You	If Attending College in 2016-2017 List the Institution
1.		<i>S e l f</i>	<i>A u g s b u r g C o l l e g e</i>
2.			
3.			
4.			
5.			
6.			
7.			
8.			

SNAP Benefits

Did you, your spouse, or parent(s) receive benefits from the Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps, any time during the 2014 or 2015 calendar years? NO _____ YES _____

Expanded Income Verification Form 2016 – 2017**Child Support PAID Information** (Attach additional pages if necessary)Did you, your spouse, or parent(s) PAY child support in 2015? **NO**____ **YES**____**If YES**, please provide the following information:

Name of Person Who Paid Child Support	Name of Person To Whom Child Support Was Paid	Name of Child For Whom Support Was Paid	Age of Child	Amount of Child Support Paid in 2015
<i>Example: Jane Doe</i>	<i>John Doe</i>	<i>Jenny Doe</i>		\$2500
				\$
				\$
				\$
Total Child Support Paid in 2015:				\$

Signature of the Person Who Paid Child Support: _____ **Date:** _____

Child Support RECEIVED Information (Attach additional pages if necessary)Did you, your spouse, or parent(s) RECEIVE child support in 2015? **NO**____ **YES**____**If YES**, please provide the following information:**NOTE: Do not include foster care payments, adoption payments or any amount that was court ordered but not actually paid.**

Name of Person Who Received Child Support	Name of Child for Whom Support Was Received	Amount Received in 2015
<i>Example: John Doe</i>	<i>Jenny Doe</i>	\$1500
		\$
		\$
		\$
Total Child Support Received in 2015:		\$

Expanded Income Verification Form 2016 – 2017**Student Financial Information**

Have you (and/or your spouse) already filed or will you be filing an income tax return for 2015? NO____ YES____

If YES, please use the **IRS Data Retrieval Tool** 2-3 weeks after you have electronically filed your taxes.

To link your 2015 taxes to the FAFSA using the IRS data Retrieval Tool:

- 1) Log on to www.fafsa.ed.gov, and select *Make a Correction*.
- 2) Click *Student Financial* on the tool bar near the top of the page.
- 3) Answer the initial tax questions. If all are “No,” the FAFSA will provide a link to the IRS Data Retrieval Tool.
- 4) When completing the request, enter the information as it appears on your taxes (name, address, etc.)
- 5) Once the link is completed, continue on the FAFSA until you reach the confirmation page.

If NO, please attach copies of all applicable W2 forms.

- **In addition**, please list all sources of income from work and total amount earned in 2015.

Employer: _____ Total: \$ _____

☐ **OR check this box if you and your spouse were not employed and had no income earned from work in 2015****Student Other Untaxed Income****If any item does not apply, enter N/A for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested.****Please list annual amount for items listed below.**

** Other untaxed income includes: Untaxed income not reported elsewhere on this form, workers' compensation, disability, black lung benefits, untaxed portions of HSA (Health Savings Accounts) from IRS form 1040, Line 25, railroad retirement benefits, etc.

** Do not include: student aid, earned income credit, additional child tax credit, TANF, untaxed social security benefits, SSI, WIA, combat pay, benefits from flexible spending arrangements, foreign income exclusion, credit for federal tax on special fuels, etc.

Name of Recipient	Type of Untaxed Income	Student Amount
<i>Example: Jane Doe</i>	<i>Money received or paid on the student behalf</i>	<i>\$100</i>
	Money received or paid on the student behalf	
	Payments to tax-deferred pension and savings plans	
	Housing, food, and other living allowances paid to members of the military, clergy	
	Veterans noneducation benefits	
	Other untaxed income**	
Total Untaxed Income from 2015:		

**If any item does not apply, enter N/A for Not Applicable where a response is requested,
or enter 0 in an area where an amount is requested.**

Expanded Income Verification Form 2016 – 2017**Parents Financial Information** (Required for a Dependent Student)

Have you already filed or will you be filing an income tax return for 2015? NO____ YES____

If YES, please use the **IRS Data Retrieval Tool** 2-3 weeks after you have electronically filed your taxes.

To link your 2015 taxes to the FAFSA using the IRS data Retrieval Tool:

- 1) Log on to www.fafsa.ed.gov, and select *Make a Correction*.
- 2) Click *Student Financial* on the tool bar near the top of the page.
- 3) Answer the initial tax questions. If all are "No," the FAFSA will provide a link to the IRS Data Retrieval Tool.
- 4) When completing the request, enter the information as it appears on your taxes (name, address, etc.)
- 5) Once the link is completed, continue on the FAFSA until you reach the confirmation page.

If NO, please attach copies of all applicable W2 forms.

- **In addition**, please list all sources of income from work and total amount earned in 2015.

Employer: _____ Total: \$ _____

☐ **OR check this box if you were not employed and had no income earned from work in 2015****Parent Other Untaxed Income****If any item does not apply, enter N/A for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested.****Please list annual amount for items listed below.**

** Other untaxed income includes: Untaxed income not reported elsewhere on this form, workers' compensation, disability, black lung benefits, untaxed portions of HSA (Health Savings Accounts) from IRS form 1040, Line 25, railroad retirement benefits, etc.

** Do not include: student aid, earned income credit, additional child tax credit, TANF, untaxed social security benefits, SSI, WIA, combat pay, benefits from flexible spending arrangements, foreign income exclusion, credit for federal tax on special fuels, etc.

Name of Recipient	Type of Untaxed Income	Parent Amount
<i>Example: John Doe</i>	<i>Money received or paid on the parent behalf</i>	<i>\$0</i>
	Money received or paid on the parent behalf	
	Payments to tax-deferred pension and savings plans	
	Housing, food, and other living allowances paid to members of the military, clergy	
	Veterans noneducation benefits	
	Other untaxed income**	
Total Untaxed Income from 2015:		

By signing this worksheet, I certify that all the information reported is complete and accurate.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

(Parent signature is required for a Dependent Student)