

2009/2010 Independent Verification Worksheet

Your FAFSA was selected for review in a process called "Verification." In this process, our office will be comparing information from your FAFSA application with copies of your signed 2008 Federal tax forms and other financial documents. If there are differences between your FAFSA information and your financial documents, our office may need to make corrections to your FAFSA. Please answer this form carefully and completely.

STUDENT INFORMATION:

Please print clearly – Illegible documents cannot be processed.

Name _____

UMBC ID _____

UMBC Email _____

Phone number _____

FAMILY INFORMATION:

List the people in your household. Include:

- Yourself and your spouse, if married;
- Your children, if you will provide more than half of their support from July 1, 2009, through June 30, 2010; and
- Any other people who live with you and receive more than half their support from you and who will continue to live with you and receive more than half of their support from you through June 30, 2010.

Write the names of all household members. Also write in the name of the college for any household member who will be attending college at least half time (typically 6 credits) between July 1, 2009 and June 30, 2010, and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	Name of College
		Self	UMBC

FILING STATUS:

Tax Filers: Independent students and his/her spouse (if married) must submit a signed copy of all 2008 federal income tax returns (includes the 2008 IRS form 1040, 1040A, 1040EZ, RTFTP tax transcript, tax return from Puerto Rico OR a foreign country tax return) for anyone whose information is required on the FAFSA. Check the box below for whom you are enclosing tax forms:

You Your spouse

Non-Tax Filers: Complete this section only if you or your spouse did not file and are not required to file a 2008 federal income tax return. List the employer(s) and income received in 2008 (use W2 forms or other earning statements) for each non-filer.

You Your spouse

Name of Employer	Student Amount	Spouse Amount

ADDITIONAL FINANCIAL INFORMATION:Please do not leave any questions blank, **enter a 0 if the question is not applicable.**

Student/Spouse

Calendar Year 2008

\$	Education Credits (Hope and Lifetime Learning tax credits) from IRS Form 1040 line 50 or 1040A line 31.
\$	Child support paid because of divorce or separation as a result of a legal requirement. Don't include support for children in your household.
\$	Taxable earnings from need-based employment programs, such as Federal Work Study and need-based employment portions of fellowships and assistantships.
\$	Student grant and scholarship aid reported to the IRS in your 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. Combat pay is reported on the W2 in box 12, code Q.

UNTAXED INCOME:Please do not leave any questions blank, **enter a 0 if the question is not applicable.**

Student/Spouse

Calendar Year 2008

\$	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including but not limited to amounts reported on the W2 forms in boxes 12A through 12D, codes D, E, F, G,H, and S.
\$	IRA deductions and payments to self-employment SEP, SIMPLE, Keogh and other qualified plans from IRS form 1040 line 28 plus line 32 or form 1040A line 17.
\$	Child support received for all children. Do not include foster or adoption payments.
\$	Tax exempt interest income from IRS form 1040 line 8b or form 1040A line 8b.
\$	Untaxed portions of IRA distributions from IRS form 1040 lines 15a minus 15b or form 1040A lines 11a minus 11b. Exclude rollovers. If negative enter a zero.
\$	Untaxed portions of pension from IRS form 1040 lines 16a minus 16b or form 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).
\$	Veterans noneducation benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.
\$	Other untaxed income not reported, such as workers' compensation, disability, etc. DO NOT include student aid, earned income credit, child tax credit, welfare payments, untaxed Social Security Benefits, Workforce Investment Act educational benefits, combat pay (if nonfiler), 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 (such as bills), not reported elsewhere on this form.

SIGNATURES:

Warning: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both. Signing the document certifies the information reported is complete and correct.

Student Signature _____

Date _____

Spouse Signature _____

Date _____