2008-2009 Independent Student/Spouse Worksheet B

IWKB9

Please Use Black or Blue Ink

Student Name:	**OSU CWID** (8-digits) **or SSN** (9 digits) (No Spaces)

The OSU Office of Scholarships and Financial Aid must, by federal regulations, verify the information on your 2008-2009 Free Application for Federal Student Aid (FAFSA). Please answer all questions on the worksheet below; if the answer is zero, write "0." **Incomplete worksheets will be returned to you. We cannot determine aid eligibility or disburse funds until all requested documents are received and reviewed.** In some cases, we must submit changes in information to the U.S. Department of Education (FAFSA processor); at that time, you will receive communication from our office as well as a Student Aid Report from the FAFSA processor.

Do not leave an answer blank. If the response is zero, place "0" on the line provided.

Calendar Year 2007	**Student/ Spouse**
1. Payments to tax-deferred pension and 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.	$ /yr
2. IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040-total of lines 28 + 32 or 1040A-line 17.	$ /yr
3. **Child Support received for all children for calendar year 2007. Don't include foster care or adoption payments.**	$ /yr
4. Tax exempt interest income from IRS Form 1040-line 8b or 1040A-line 8b.	$ /yr
5. Foreign income exclusion from IRS Form 2555-line 45 or Form 2555EZ-line 18.	$ /yr
6. Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). **Exclude rollovers**. If negative, enter a zero.	$ /yr
7. 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.	$ /yr
8. Credit for federal tax on special fuels from IRS Form 4136-line 18 (non-farmers only).	$ /yr
9. Housing, food, and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits).	$ /yr
10. Veteran's non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	$ /yr
11. Untaxed portions of Worker's Compensation and/or Disability.	$ /yr
12. Any other untaxed income or benefits such as untaxed portions of railroad retirement benefits, Black Lung Benefits, etc. Tax filers only: report untaxed combat pay. **Don't include:** student aid, Workforce Investment Act educational benefits, benefits from flexible spending arrangements, e.g., cafeteria plans, Social Security Benefits received, TANF or food stamps.	$ /yr
13. Money **received**, or paid on your behalf (e.g., bills), not reported elsewhere on the FAFSA.	$ /yr

Certification/Signature:
By signing this form, I (we) certify that all the information reported to qualify for federal student aid is complete and correct.
If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

_____ _____
Student's Signature Date

Please return to:
Office of Scholarships and Financial Aid
119 Student Union, Stillwater, OK 74078-5061
Email: finaid@okstate.edu
(405) 744-6604
www.okstate.edu/finaid
FAX#: (405) 744-6438
(If you fax this form, please don't mail it)

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