

B. STUDENT/PARENT Untaxed Income Information

Untaxed Income	Student Amount in 2018	Parent Amount in 2018
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 forms in Boxes 12a through 12d, codes D, E, F, G, H and S. Don't include amounts reported in code DD (employer contributions toward employee health benefits).		
IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040—line 28 + line 32 or 1040A—line 17.		
Child support received for any of children. Don't include foster care or adoption payments.	N/A	
Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b.		
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 here.		
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 here.		
Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.		
Veterans noneducation benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.		
Other untaxed income not reported in items 45a- 45h or 94a-94h, such as workers' compensation, disability, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040—line 25. Don't include extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, combat pay, 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 (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent whose financial information is not reported on this form and that is not part of a legal child support agreement.		N/A

C. Student Tax and Income Information- Check one box

- Student 2018 IRS tax return.
 - I updated the FAFSA and used the IRS data retrieval option for the student financial information on (date)_____
 - I have attached the student's 2018 IRS tax return.
 - I will not file and am not required to file a 2018 Federal Tax Return. Table below must be completed if you worked in 2018.

Employers / Source of Income	Amount in 2018	W2 was received for this
		<input type="checkbox"/> No <input type="checkbox"/> Yes, please attach W2
		<input type="checkbox"/> No <input type="checkbox"/> Yes, please attach W2

D. Parent Tax Forms and Income Information- Check one box

- Parent 2018 IRS tax return.
 - I updated the FAFSA and used the IRS data retrieval option for the parent financial information on (date)_____
 - I have attached the parent's 2018 IRS tax return.
 - I will not file, am not required to file a 2018 Federal Tax Return, and I DID NOT work in 2018. I submitted the 4506-T to the IRS on (date)_____.
(Confirmation of nonfiling status is required. Submit form 4506-T to the IRS to obtain the acceptable nonfiling status confirmation. Complete lines 1-4 and the signature section of the attached 4506-T form.)
 - I will not file, am not required to file a 2018 Federal Tax Return and I DID work in 2018. I submitted the attached 4506-T to the IRS on (date)_____ and completed the chart below.
(Confirmation of nonfiling status is required. Submit form 4506-T to the IRS to obtain the acceptable nonfiling status confirmation. Complete lines 1-4 and the signature section of the attached 4506-T form.)

Employers / Source of Income	Amount in 2018	W2 was received for this
		<input type="checkbox"/> No <input type="checkbox"/> Yes, please attach W2
		<input type="checkbox"/> No <input type="checkbox"/> Yes, please attach W2

E. EXPECTED 2020 INCOME (January 1, 2020 – December 31, 2020)- Complete ONLY if you are appealing due to loss of income and ONLY for the individual affected.

Affected person(s):

Name of individual(s) whose income has significantly changed _____

1. In the spaces below, the affected person will need to itemize their actual and/or estimated total monthly gross income (before deductions) from work. If they will not have any income from work please fill in blank(s) with a zero (0).
2. If the affected person will be receiving any of these benefits below, please indicate the amounts per month and total all columns that have monthly amounts reported.

Monthly gross income from work (before deductions)

Please Check:

- Student
- Father
- Mother

Jan 2020	\$	
Feb 2020	\$	
Mar 2020	\$	
Apr 2020	\$	
May 2020	\$	
June 2020	\$	
July 2020	\$	
Aug 2020	\$	
Sept 2020	\$	
Oct 2020	\$	
Nov 2020	\$	
Dec 2020	\$	
Total		

Monthly income from benefits

Please Check:

- Unemployment benefit
- Worker's compensation
- Child support received (for all family members)

Jan 2020	\$	
Feb 2020	\$	
Mar 2020	\$	
Apr 2020	\$	
May 2020	\$	
June 2020	\$	
July 2020	\$	
Aug 2020	\$	
Sept 2020	\$	
Oct 2020	\$	
Nov 2020	\$	
Dec 2020	\$	
Total		

All of the following are required:

- A detailed letter explaining my special circumstances
- Your and your parent's 2018 **signed IRS tax return**
- Acceptable documentation to support my special circumstance
- A completed and signed copy of this form

My signature below certifies that all information on this request and attachments is true, accurate and complete to the best of my knowledge. I understand that approval of this request is contingent upon the accuracy of the information submitted on the FAFSA.

Student signature: _____ Date: _____

Parent signature: _____ Date: _____

After all required documents have been received, the student will be notified of the outcome via Edgewood email within 2 weeks. If you would like the results copied to an additional email address, please provide the address below.

Additional email: _____

Submit Materials to:
Edgewood Central
1000 Edgewood College Dr.
Madison, WI 53711

Fax: 608-663-3495
Scan & Email: ecentral@edgewood.edu