

<b>Student Name:</b>	
<b>Student ID#:</b>	

### Instructions:

If the student was required to provide parental information on the FAFSA answer each question below as it applies to the student and student's parent (s) whose information is on the FAFSA.

If the student was not required to provide parental information on the FAFSA, answer each question below as it applies to the student (and the student's spouse, if married) whose information is on the FAFSA.

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 use yearly totals and not monthly amounts.

<b>Calendar Year 2020</b>	<b>Parent(s)</b>	<b>Student/Spouse</b>
Payments to tax-deferred pension and saving plans (paid directly or withheld from earnings), including but not limited to, amounts reported on the W-2 in Boxes 12a through 12d, Codes D, E, F, G, H and S in 2020. <b>Do Not Include</b> amounts reported in code DD (employer contributions toward employee health benefits). <i>Attach 2020 W-2's</i>	\$	\$
IRA Deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans in 2020. <i>IRS Form1040 Schedule1 – total of lines 15 + 19</i>	\$	\$
Total annual amount of child support RECEIVED for any of your children. <b>Do Not Include</b> foster care or adoption payments. <i>Attach proof of child support received 2020 from child support enforcement.</i>	\$	\$
Tax exempt interest income from <i>IRS Form 1040 - line 2a</i>	\$	\$
Untaxed portions of IRA distributions and pensions from IRS Form 1040 line – (4a + 5a) minus (4b + 5b). <b>Exclude Rollovers.</b> If negative, enter a zero here.	\$	\$
Housing, food and other living allowance paid to members of the military, clergy and others (including cash payments and cash value of benefits). <b>Don't include</b> the value of on-base military housing or the value of basic military allowance for housing.	\$	\$
Veterans' non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-study allowance.	\$	\$

<p>Other untaxed income not reported in items 44a through 44g (student) or 92a through 92g (parent), such as worker's compensation, disability benefits, etc. Also include the untaxed portions of health savings accounts (IRS form 1040 Schedule 1 - line 12). <b>Don't include</b> extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-base military housing or 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.</p> <p><i>Attach proof of items received for 2020</i></p>	\$	\$
<p>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 or other person whose financial information is not reported on this form and that is not part of a legal child support agreement.</p>	XXXXXXX	\$

**Signatures:**

I/We certify that all the information on this form is true and accurate.

**\*Requires physical signature. Unsigned forms or those with digital /electronic/types signatures will be returned.**

<b>Student Signature:</b>		<b>Date:</b>
<b>Parent/Spouse Signature:</b> (if applicable)		<b>Date:</b>

**\*\*Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

**Bismarck State College Financial Aid Office**  
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