



## 2019-20 Verification of Taxed and Untaxed Income and Assets

You have been selected by the UC Santa Cruz Financial Aid and Scholarship Office for a process called “verification”. In this process, we will compare information you provided on the financial aid application with information you provide in this packet. If necessary, we will make corrections and update your application. If you submit documents after the due date, you may be ineligible for institutional aid programs.

**Due Date: June 2, 2019 postmark (July 1 for Transfers)**

Submit the completed and **signed** forms to:

UC Santa Cruz  
Financial Aid and Scholarship Office  
205 Hahn Student Services Building  
1156 High Street  
Santa Cruz, CA 95064

If you send documents, please mail **copies** and do not send originals. If you have questions about the information contained in this packet, please contact us at 831-459-2963.

Please be advised that due to FERPA laws, our office will only speak with third parties (including parents) if authorized on the “Authorization to Release Information” form provided directly to UCSC students.

### TAX INFORMATION

Use the checklist below before mailing your information to avoid delays:

- Attached **copies** of my parent/s and student’s 2017 tax transcript—as well as copies of all 2017 W-2 and/or 1099 forms. To obtain a copy of your tax transcript and W-2s from the IRS website, go to [irs.gov/Individuals/Get-Transcript](https://irs.gov/Individuals/Get-Transcript).
- My parent/s is/are not a tax filer and I have attached an IRS Verification of Non-Filing. (To obtain a copy of your tax transcript from the IRS website, go to [irs.gov/Individuals/Get-Transcript](https://irs.gov/Individuals/Get-Transcript), use form 4506-T, or call 1(800) 908-9946.)

### Signatures

- Signatures are required on the certification found on the last page of this packet.
- Answer All Questions. DO NOT LEAVE BLANKS. If something does not apply to you, respond using “N/A” (not applicable) or a “0” (zero).** A blank answer will mean the information is incomplete and you will be asked to complete a new packet which may delay your eligibility for financial aid.

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UCSC Student's ID /Account Number (Do not use CRUZ ID)

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UCSC Student's Last Name

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First Name

1. Print the student's name and ID/account number clearly at the top of all pages of this packet and all documents attached.
  2. The parent and student who provided the financial aid application information must complete and sign the Certification on page 5.
  3. The parent and student must answer all questions. IF THE ANSWER IS ZERO, OR IS NOT APPLICABLE, WRITE IN A "0".
- Student living arrangements during the 2019-20 academic year (check one):

- On Campus       Off Campus       With parent(s)

**DO NOT LEAVE BLANKS.**

### FEDERAL TAX RETURNS AND INCOME INFORMATION

**STUDENT** Please report income earned. Submit copies of all W-2s and 1099s \$\_\_\_\_\_

Also, list below the names of all employers, the amount earned and whether an IRS W-2 form was provided.

Employer's Name	Amount Earned	Was IRS form provided? (Answer Yes or No)

- I am not required to file a 2017 Federal Tax Return.
- I filed a 2017 Federal Tax Return; a copy of the 2017 tax transcript is attached and all W-2s and 1099s
- I filed a 2017 Foreign Tax Return, a signed copy of the foreign return plus a certified translated in English copy is attached, converted to US Dollars.

**PARENT** Please report income earned. Submit all W-2s and 1099s \$\_\_\_\_\_

Also, list below the names of all employers, the amount earned and whether an IRS W-2 form was provided.

Employer's Name	Amount Earned	Was IRS form provided? (Answer Yes or No)

- I am not required to file a 2017 Federal Tax Return and a copy of the IRS Verification of Non-Filing is attached.
- I filed a 2017 Federal tax Return. A copy of the 2017 tax transcript and all W-2s and 1099s is attached.
- I filed a 2017 Foreign Tax Return. A signed copy of the foreign return plus a certified translation in English, converted to U.S. Dollars, is attached.

Do you own and control more than 50% of a business with over 100 employees?     yes     no

In 2017 or 2018, did you or anyone in your household receive benefits from any of the Federal programs listed? Mark all programs that apply:

- Supplemental Security Income     Supplemental Nutrition Assistance Program (SNAP)     Free or reduced price lunch     TANF     WIC

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UCSC Student's Last Name

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First Name

**FOR THIS SECTION PLEASE REPORT INFORMATION AS OF THE DATE YOU FIRST FILED THE 2019-20 FINANCIAL AID APPLICATION.**

<b>Cash, Savings and Checking Accounts</b>	<b>PARENT</b>	<b>STUDENT</b>
	\$ _____	\$ _____

**Net Worth of Your Investments**

Note: Investments **do not include the home you live in, the value of life insurance, retirement plans (pension funds, annuities, non-education IRA's, Keogh plans, etc.)**

Net worth of your investments, other than investment real estate reported below. Investments include trust funds, UGMA/UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, installment and land sale contracts (including mortgages held), commodities, etc. Investments also include qualified educational benefits or education savings accounts (e.g. Coverdell savings accounts, 529 college savings plans and the total refund value of all 529 prepaid tuition plans.

<b>PARENT</b>	<b>STUDENT</b>
\$ _____	\$ _____

**PARENT(S) REAL ESTATE INVESTMENTS** (not included in net worth listed above)

Complete this information for all real estate you (and your spouse) own such as mobile homes, condos, duplexes, rental property, land, summer homes, etc., as of the date the 2019-20 financial aid application was filed. Do not include the home you live in.

Do you the parent(s) own real estate investments excluding the home you live in?  Yes  No If yes, provide details below.

**Property 1** (Do not report the home you live in):

Current Market Value\* \$ \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_ Year Acquired \_\_\_\_\_

Property Address \_\_\_\_\_  
Street address City State Zip Code

**Property 2** (Do not report the home you live in):

Current Market Value\* \$ \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_ Year Acquired \_\_\_\_\_

Property Address \_\_\_\_\_  
Street address City State Zip Code

**Property 3** (Do not report the home you live in):

Current Market Value\* \$ \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_ Year Acquired \_\_\_\_\_

Property Address \_\_\_\_\_  
Street address City State Zip Code

Complete this section if you, the parent, **RENTED OUT A PORTION OF THE HOME YOU LIVE IN** that meets the following criteria: the rental unit has its own entry and includes a kitchen and bath. The portion of your home that generates rental income is considered an asset and must be reported as an investment net worth on the financial aid application. Complete the following information about the home you live in:

Current Market Value\* \$ \_\_\_\_\_ Mortgage Balance \$ \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_ Year Acquired \_\_\_\_\_

Rental Square Footage \_\_\_\_\_ + Home Square Footage \_\_\_\_\_ = Total Dwelling Square Footage \_\_\_\_\_

\*on the date you filed the financial aid application

**STUDENT REAL ESTATE INVESTMENTS**

Does the student own any real estate investment property  yes  no

*For Office Use Only*

Real Estate Net Worth = Total of Net Value of Each Property listed above \_\_\_\_\_

Total Investments \_\_\_\_\_ + Real Estate Net Worth \_\_\_\_\_ = Total Investment Net Worth \_\_\_\_\_

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First Name

**DO NOT LEAVE BLANKS.**

**FOR THE FOLLOWING OTHER INCOME INFORMATION, PLEASE REPORT 2017 CALENDAR YEAR INFORMATION**

**PARENT**

**STUDENT**

1. Child support **received** by you (and your spouse) for any of your children. Do not include foster care or adoption payments.

\$ \_\_\_\_\_ /yr.

\$ N/A /yr.

Name of person who paid child support	Name of person to whom child support was paid	Name of child for whom support was paid	Amount of child support paid in 2016

2. Housing, food, and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits—for example, Resident Assistant (RA) housing benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.

\$ \_\_\_\_\_ /yr.

\$ \_\_\_\_\_ /yr.

3. Veterans noneducation benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.

\$ \_\_\_\_\_ /yr.

\$ \_\_\_\_\_ /yr.

4. Other untaxed income not reported, such as workers' compensation, disability benefits, 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 Innovation and Opportunity 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.

List source: \_\_\_\_\_

\$ \_\_\_\_\_ /yr.

\$ \_\_\_\_\_ /yr.

5. Money received as gifts or to make payments on your behalf (e.g. bills) not reported elsewhere on this form. Do not include financial aid. Include money received from a parent or other person whose financial information is not reported on this form and is not part of a legal child support agreement.

Please state source: \_\_\_\_\_

\$ N/A /yr.

\$ \_\_\_\_\_ /yr.

6. Child support **paid** by you because of divorce or separation or as a result of a legal requirement. Do not include support for children in your household.

\$ \_\_\_\_\_ /yr.

\$ N/A /yr.

Name of person who paid child support	Name of person to whom child support was paid	Name of child for whom support was paid	Amount of child support paid in 2016

7. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.

\$ \_\_\_\_\_ /yr.

\$ \_\_\_\_\_ /yr.

8. Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Do not enter untaxed combat pay.

\$ \_\_\_\_\_ /yr.

\$ \_\_\_\_\_ /yr.

9. Earnings from work under a cooperative education program offered by a college.

\$ \_\_\_\_\_ /yr.

\$ \_\_\_\_\_ /yr.

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First Name

### HOUSEHOLD INFORMATION

Parent, list the people in your household. Include yourself, your spouse, and your children, if (a) you provide more than half of their support or (b) the children would be required to provide parental information when applying for federal student aid. If you are not married but live together with the student's other biological/adoptive parent or as determined by the state (i.e. the parent is listed on the birth certificate), regardless of gender, list this person as Parent 2. List any other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2019 through June 30, 2020. **If you have additional people to list, attach a separate sheet of paper with the required information.** Do not include your parent(s) in college. Do not include siblings who are in U.S. Military Service Academies.

	Full Name of Family Member in Household	Age	Relationship to Student	Name of Title IV* College (if attending in 2019-2020)	For those enrolled at least half time in a Title IV* college for 2019-20, select the level of degree.
Parent 1					
Parent 2					
UCSC Student			self	UCSC	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate student
Other Members in Household					<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate student
					<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate student
					<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate student
					<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate student

\* Title IV: Public or private institutions of higher education located in the U.S. or its territories.

In 2016 or 2017, did you receive federal low-income housing such as HUD or Section 8?  Yes  No

### CERTIFICATION

- I hereby declare that all information reported on this document is true, complete, and accurate to the best of my knowledge.
- I understand that any false statement or misrepresentation will be cause for denial, reduction, cancellation and/or repayment of financial aid.
- This document must be postmarked no later than June 2, 2019 to meet the priority deadline for all types of financial aid.

Parent, please report your marital status as of the date you submitted the 2019-2020 financial aid application.

As of the date I filed the 2019-20 financial aid application, I, the parent, am (check one box below):

- Never Married
- Divorced or Separated
- Married/Remarried
- Widowed
- Unmarried and both parents living together

Month and year you were either divorced, separated, married/reamarried or widowed

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month	Year		

Parent Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_ Parent Name \_\_\_\_\_

Parent Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Parent E-mail Address \_\_\_\_\_ PLEASE PRINT

Student Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Student E-mail \_\_\_\_\_ PLEASE PRINT