



**2009-2010 STUDENT INCOME STATEMENT** (FOR NON-TAX FILERS ONLY)

STUDENT NAME \_\_\_\_\_

CHAPMAN ID \_\_\_\_\_

Complete this form if YOU ARE NOT REQUIRED TO FILE AND WILL NOT FILE a 2008 federal income tax return (Form 1040, 1040A, or 1040EZ). For filing requirement details visit <http://www.irs.gov/pub/irs-pdf/p17.pdf>. If you are married, the income of your spouse must also be reported on this form; if you are separated or divorced, report your income only. Enter the **EXACT YEARLY INCOME** from January 1, 2008 to December 31, 2008.

**DO NOT LEAVE ANY LINE BLANK. USE ZEROS IF YOU ARE REPORTING NO INCOME.**

**A. 2008 WORK INCOME:**

**TOTAL DOLLAR AMOUNT FOR 2008**

	STUDENT	SPOUSE
EMPLOYER:	\$	\$
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**B. 2008 OTHER INCOME OR RESOURCES:**

	STUDENT	SPOUSE
Payments to tax-deferred pension and savings plan (paid directly or withheld from earnings), including from the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S.	\$	\$
Child support <b>received</b> for all children. Don't include foster care or adoption payments.	\$	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (Including cash payments and cash value of benefits).	\$	\$
Veterans non-education benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$	\$
Any other untaxed income or benefits not reported elsewhere, such as worker's compensation, untaxed portions of railroad retirements benefits, Black Lung Benefits, Refugee Assistance, etc. <b>Don't include</b> student aid, Workforce Investment Act educational benefits, combat pay, or benefits from flexible spending arrangements, e.g. cafeteria plans, welfare benefits including Temporary Assistance for Needy Families (TANF), food stamps, untaxed social security benefits.	\$	\$
Alimony	\$	\$
Other (List Source)	\$	\$

**CERTIFICATION:** All of the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form. I also realize that purposely giving false or misleading information on this form may result in reduced eligibility and/or repayment of aid.

STUDENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_