



State Grant and Special Programs
Phone: 1-800-692-7392 Fax: 717-720-3786
P.O. Box 8157, Harrisburg, PA 17105-8157

2020-21 ADDITIONAL FINANCIAL INFORMATION CLARIFICATION FORM
(NOTE: Deadline for returning this form and 2018 tax documents to PHEAA is April 1, 2021.)

Print Student's Name

Student's Account Number

OR

Student's Social Security Number
2020-21

The Pennsylvania Higher Education Assistance Agency (PHEAA) requires additional information with regard to your family's income. Please submit the following data to PHEAA, P.O. Box 8157, Harrisburg, PA 17105-8157 within 30 days.

Please provide a complete copy as filed with IRS of your (and your spouse's if married) and your parent(s)/stepparent's (if you are considered by PHEAA a dependent of your parent(s)/stepparent) 2017 U.S. Income Tax Return.

- a. Educational credits, (American Opportunity, Hope and Lifetime Learning tax credits) from 2018 IRS Form 1040-Schedule 3 line 50.

Student's (and spouse's, if applicable) \$ _____ Parent(s)/Stepparent's \$ _____

- b. Child support you paid or your parents paid because of divorce or separation or as result of legal requirement. Do not include support for children in your (or your parent(s)/stepparent's) household, as reported in your family's household size.

Student's (and spouse's, if applicable) \$ _____ Parent(s)/Stepparent's \$ _____

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

Student's (and spouse's, if applicable) \$ _____ Parent(s)/Stepparent's \$ _____





State Grant and Special Programs
Phone: 1-800-692-7392 Fax: 717-720-3786
P.O. Box 8157, Harrisburg, PA 17105-8157

d. Student grant and scholarship aid reported to the IRS in your (or your parent(s)/stepparent's) adjusted gross income. Include AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships. You must provide verification that these amounts have been included on your or your parent(s)/stepparent's tax return.

Student's (and spouse's, if applicable) \$ _____ Parent(s)/Stepparent's \$ _____

e. Combat pay or special combat pay. Only enter the amount that was taxable and included in the adjusted gross income. Do not enter combat pay reported on the W-2 (Box 12, code Q).

Student's (and spouse's, if applicable) \$ _____ Parent(s)/Stepparent's \$ _____

f. Taxable earnings from work under a cooperative education program offered by a college.

Student's (and spouse's, if applicable) \$ _____ Parent(s)/Stepparent's \$ _____

THE PENALTY FOR SUBMISSION OF FRAUDULENT INFORMATION ON THIS FORM MAY BE REPAYMENT OF TRIPLE ANY AMOUNT OF MONEY RECEIVED PLUS A FINE AND/OR IMPRISONMENT.

Signature of Parent/Stepparent Date

Signature of Student Date

