



Return to:
Office of Financial Aid
301 Platt Boulevard
Claremont, CA 91711
Office: (909) 621-8055
Fax: (909) 607-7046
financial_aid@hmc.edu

Name of Student Financial Aid Applicant (please print):

Last

First

Middle

Social Security Number: _____ - _____ - _____

2007 PARENT(S) UNTAXED INCOME FORM

Please report untaxed income and/or benefits received from January 1, 2007 to December 31, 2007. If no untaxed income and/or benefits were received from any of the following sources, please indicate "0".

Type of Untaxed Income or Benefit Received:	2007 Amount
Child Support received for all children (don't include foster care or adoption payments)	\$ _____
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings) including amounts on your W-2 Form in Box 12a through 12d, codes D, E, F, G, H, and S. Include pre-tax payments to 401(k) and 403(b) plans	\$ _____
Earned Income Credit (from Form 1040 line 66a; Form 1040A line 40a; Form 1040EZ line 8a.	\$ _____
IRA deductions and/or payments to self-employed SEP, SIMPLE, Keogh and other qualified plans (from Form 1040 total of lines 28 and 32 or 1040A line 17)	\$ _____
Untaxed portions of pensions (from Form 1040 lines 16a minus 16b or 1040A lines 12a minus 12b--excluding "rollovers")	\$ _____
Social Security Benefits received for all household members that were not taxed (such as SSI)	\$ _____
Untaxed portions of IRA distributions from IRS form 1040 lines 15a minus 15b or 1040A lines 11a minus 11b – excluding "rollovers")	\$ _____
Credit for federal tax on special fuels from IRS Form 4136, line 20 (non-farmers only)	\$ _____
Foreign income exclusion (from Form 2555, line 45 or Form 2555EZ, line 18)	\$ _____
Tax exempt interest income (from Form 1040 line 8b or Form 1040A line 8b)	\$ _____
Welfare benefits, including Temporary Assistance for Needy Families (TANF). Don't include food stamps or rent subsidized for low income housing.	\$ _____
Untaxed Workers' Compensation	\$ _____
Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits).	\$ _____
Veterans' noneducation benefits such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances	\$ _____
Additional child tax credit from IRS Form 1040 line 68 or 1040A line 41	\$ _____
Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.	\$ _____
Other untaxed income (please specify source): _____	\$ _____
TOTAL:	\$ _____

Father's Signature: _____

Date: _____

Mother's Signature: _____

Date: _____