

Supplemental Foreign Income

Student Name: _____ Student ID Number (required): _____

Complete this form to report foreign income received in the 2016 calendar year. If you are a dependent student, your parent(s) must complete and sign this form. If you are an independent student, provide the information about yourself. **DO NOT** enter any amount that is included on a U.S. Income Tax Return. Attach copies of all foreign tax documents and translations to verify reported amounts.

1. Total number of people in your family: _____ 2. Marital status: Married Single

3. Household Information

Name of Family Member	Relationship to Student	Age	Number of months you provided support in 2017

4. In what currency is the foreign income? _____ From what country? _____

	Foreign Currency	Exchange Rate	In U.S. Dollars
5. Enter amount you or your spouse earned from employment by others			
6. Enter the amount of interest you received from banks or other sources			
7. Enter the amount you received in dividends from ownership of stock			
8. Enter the amount of income or loss you had as a result of owning or operating a business or professional entity			
9. Enter the amount of gain or loss you had from the sale of assets, investments, or capital property. Describe on the back of this sheet and include the original cost and selling price			
10. Enter the amount you received from personal retirement funds or annuities			
11. Enter the amount of retirement pension income from employers			
12. Enter the amount of income you received from the operation of rental operations or from royalties or copyright payments			
13. Enter the amount of income you received from farming.			
14. Enter the amount of unemployment income subsidies you received from insurance or the government			
15. Enter the amount of government disability survivor or retirement pensions received			
16. Enter the amount of any other income you had that is not listed above or on a U.S. Income Tax Return			
17. Enter the amount of income tax paid to governments other than the U.S.			
18. Enter the total amount of all cash savings, and attach copies of year-end statements			
19. Enter the value of all corporate stock and partnership values			
20. Enter the value of all properties other than the family residence			
21. Enter the amount of mortgages, if any, on the properties above. Do not include the family residence			
22. Enter the value of any family business			

Taxpayer Signature

Print Name

Date

To expedite the processing of this form, please fax it to our Financial Aid Forms fax: 855-895-3690. In-person drop-off: Cal Student Central, 120 Sproul Hall. Mailing address: University of California, Berkeley, Financial Aid and Scholarships Office 2nd Floor Sproul Hall, Berkeley, CA 94720.