

2016- 2017 Untaxed Income Worksheet

Name _____

SSN _____

2015 Untaxed Income

Please use the amounts from your 2015 taxes. Please report 2015 **annual amounts**.

**You MUST enter "N/A" for Not Applicable, "0", or the actual amount in EACH field
NO FIELD SHOULD BE LEFT BLANK**

Student

Parent/Spouse/Neither (please circle one)

\$	Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S.	\$
\$	Child support received in 2015 for all children. Do not include foster care or adoption, payments or any amount that was court-ordered but not actually paid.	\$
\$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits) Do not include the value of on-base military housing or the value of basic military allowance for housing.	\$
\$	Veterans' non-education benefits include Disability, Death Pension, Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances. Do not include federal veteran's educational benefits such as the Montgomery GI Bill, Dependents Education Assistance Program, VEAP, and Post-9/11 GI Bill.	\$
\$	Other untaxed income not reported and elsewhere on this form, such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS form 1040 Line 25, Railroad Retirement Benefits etc. Do not include any items reported or excluded from first three fields, student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security Benefits, Supplemental Security Income (SSI), Workforce Innovation and Opportunity Act (WIOA), educational benefits, on-base military housing or a military housing allowance, combat pay, or benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.	\$
\$	Money received , or paid on your behalf (e.g., bills), not reported elsewhere on this form. Include support from a parent whose information was not reported on your 2016-17 FAFSA but do not include support from a parent whose information was included on the 2016-17 FAFSA. Amounts paid on the student's behalf also include any distributions to the student from a 529 plan <u>owned by someone other than the student or the student's parents</u> , such as, grandparents, aunts and uncles of the student.	\$

CERTIFICATION AND SIGNATURE

The person signing below certifies that all of the information reported is complete and correct

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

Student Signature (Required)

Date

Parent Signature (Required for Dependent Students)

Date