



2017-18 Untaxed Income Verification Worksheet

Student: _____

ID: _____

Please do not leave any boxes blank. Mark any items that do not apply as N/A or \$0.

2015	Student	Parent
1. Payments to tax-deferred pension and retirement savings <ul style="list-style-type: none"> • Paid directly or withheld from earnings • Includes, but not limited to, amounts reported on W2 forms, Boxes 12a through 12d, codes D, E, F, G, H, and S. Do NOT include amounts with code 	\$	\$
2. Child support received	\$	\$
3. Housing, food, and other living allowances paid to you as members of the military, clergy, and others. <ul style="list-style-type: none"> • Includes cash payments and cash value of benefits • Do NOT include value of on-base military housing or value of basic military housing allowance 	\$	\$
4. Veterans non-education benefits <ul style="list-style-type: none"> • Includes Disability, Death Pension, DIC, and VA Educational Work-Study 	\$	\$
5. Other Untaxed income <i>Note: Please identify the sources and other details in the space below this table.</i> <ul style="list-style-type: none"> • Include workers' compensation, disability, etc. • Include untaxed portions of health savings accounts (IRS Form 1040 – line 25) • Includes untaxed income earned from work and other miscellaneous sources • Do NOT include foster care benefits, student aid, EIC, child tax credits. 	\$	\$
6. Money received from others, or paid on your behalf, not reported elsewhere on this form <i>Note: Please identify the sources and other details in the space below this table</i> <ul style="list-style-type: none"> • Ex. Financial help for household bills, food, rent, gas, etc. • Distributions from a 529 plan owned by someone other than your parents • Money received from a parent whose financial information is not reported on this form and that is not part of a legal child support agreement 	\$	N/A

In the space below, please provide additional details regarding the source and type of funds listed for fields #5 and/or #6 in the table above. Use the back of this form if additional space is needed.

Additional income sources for 2015	Student	Parent
Unemployment compensation	\$	\$
Social Security benefits received	\$	\$
TANF benefits received	\$	\$

I/We certify that the information provided above is correct.

Student Signature

date

Parent Signature (if Dependent)

date