Verification of Other Untaxed Income for 2015

If any item does not apply, enter "N/A" for Not Applicable where a <u>response</u> is requested, or enter 0 in an area where an amount is requested.

If you are not required to provide parental information on the FAFSA, answer each question below as it applies to you (and your spouse, if married) whose information is on the FAFSA.

2015 IRS W-2 forms: Provide copies of all 2015 IRS W-2 forms issued by the employers to you the dependent student and your parents or <u>to you the independent student and your</u> spouse, if you are married.

To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2015, multiply that amount by the number of months in 2015 you paid or received it. If you did not pay or receive the same amount each month in 2015, add together the amounts you paid or received each month.

If more space is needed, provide a separate page with your name and ID number at the top.

A. Payments to tax-deferred pension and retirement savings

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g., 401(k) or 403(b) plans), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S.

Name of Person Who Made the Payment	Annual Amount Paid in 2015
Total Payments to tax-deferred pension and	
retirement savings	\$

В.	Child	sup	port	rece	ive	d
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List the actual amount of any child support received in 2015 for the children in your household.

Do not include foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

Name of Adult Who Received the Support	Name of Child For Whom Support Was Received	Annual Amount of Child Support Received in 2015
Total Amount of	Child Support Received	\$

Verification of Other Untaxed Income for 2015

C. Housing, food, and other living allowances paid to members of the military, clergy, and others

Include cash payments and/or the cash value of benefits received.

Do not include the value of on-base military housing or the value of a basic military allowance for housing.

Name of Recipient	Type of Benefit Received	Annual Amount of Benefits Received in 2015
Total Amount of Benefits Received		\$

D. Veterans non-education benefits

List the total amount of veterans non-education benefits received in 2015. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.

Do not include federal veteran's educational benefits such as: Post-9/11 GI Bill, Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits

Name of Recipient	Type of Veterans Non-education Benefit	Annual Amount of Benefits Received in 2015
Total Amount of Benefits Received		\$

E. Other untaxed income

List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability benefits, 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 in A – D above. In addition, do not include extended foster care benefits, 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 military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of Recipient	Type of Other Untaxed Income	Annual Amount of Other Untaxed Income Received in 2015
Total Amount of Other Untaxed		\$
Income		

Verification of Other Untaxed Income for 2015

F. Money received or paid on your behalf

List any money received or paid on your behalf (e.g., payment of your bills) and not reported elsewhere on this form. Enter the total amount of cash support you received in 2015. Include support from a parent whose information was not reported on the 2016–2017 FAFSA, but do not include support from a parent whose information was reported. For example, if someone is paying rent, utility bills, etc., for you or gives you cash, gift cards, etc., include the amount of that person's contributions unless the person is your parent whose information is reported on the 2016–2017 FAFSA. Amounts paid on your behalf also include any distributions to you from a 529 plan owned by someone other than you or your parents, such as your grandparents, aunts, and uncles.

Purpose: e.g., Cash, Rent, Books	Annual Amount Received in 2015	Source
Total Amount Received	\$	

Verification of Other Untaxed Income for 2015

Additional information:

Name of Recipient

Please provide information about any other resources, benefits, and other amounts received by you and any members of your household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as federal veterans' education benefits, military housing, SNAP, TANF, etc.

If more space is needed, provide a separate page with your name and ID number at the top.

Type of

Financial Support

Annual Amount of

Financial Support

Received in 2015

	Total Amount of Fi	nancial Support I	Received \$	
Comments:				
Student Na	me (print)		Student SSN	
Student Sig	ınature		Date	