

## 2020-21 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.

2017 Amounts	Student	Parent
<b>1. Payments to tax-deferred pension and retirement savings</b> <ul style="list-style-type: none"> <li>• Paid directly or withheld from earnings</li> <li>• Includes, but not limited to, amounts reported on W2 forms, Boxes 12a through 12d, codes D, E, F, G, H, and S. Do <b>NOT</b> include amounts with code DD</li> </ul>	\$	\$
<b>2. Child support received</b>	\$	\$
<b>3. Housing, food, and other living allowances paid to you as members of the military, clergy, and others.</b> <ul style="list-style-type: none"> <li>• Includes cash payments and cash value of benefits</li> <li>• Do <b>NOT</b> include value of on-base military housing or value of basic military housing allowance</li> </ul>	\$	\$
<b>4. Veterans non-education benefits</b> <ul style="list-style-type: none"> <li>• Includes Disability, Death Pension, DIC, and VA Educational Work-Study</li> </ul>	\$	\$
<b>5. Other Untaxed income</b> <i>Note: Please identify the sources and other details in the space below this table.</i> <ul style="list-style-type: none"> <li>• Include workers' compensation, disability, etc.</li> <li>• Include untaxed portions of health savings accounts (IRS Form 1040 – line 25)</li> <li>• Includes untaxed income earned from work and other miscellaneous sources</li> <li>• Do <b>NOT</b> include foster care benefits, student aid, EIC, child tax credits, welfare payments, untaxed Social Security, SSI, military housing allowance, combat pay</li> </ul>	\$	\$
<b>6. Money received from others, or paid on your behalf, not reported elsewhere on this form</b> <i>Note: Please identify the sources and other details in the space below this table</i> <ul style="list-style-type: none"> <li>• Ex. Financial help for household bills, food, rent, gas, etc.</li> <li>• Distributions from a 529 plan owned by someone other than your parents</li> <li>• 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</li> </ul>	\$	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.

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Additional income sources for 2017	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