



# 2016-2017 Verification of Other Untaxed Income

Aid Year \_\_\_\_\_

Your FAFSA was selected for verification of *Untaxed Income* by the Department of Education. You are required to complete this form for a review of any untaxed income that may have been used to support your or your parent’s household. Review the instructions below, complete the form accordingly, and submit to the Financial Aid Office along with other required documentation.

\_\_\_\_\_  
Student’s Name

\_\_\_\_\_  
Student’s ID

**Select Applicable Statement and complete form accordingly:**

- I, the student, was required to provide parental information on the FAFSA. The answers on this form reflect information for me and/or my parents.
- I, the student, was **not** required to provide parental information on the FAFSA. The answers on this form reflect information from me and/or my spouse.

**IMPORTANT INFORMATION: You must list annual amounts below:**

- If you paid or received the same dollar amount every month, multiply that amount by the number of months you paid or received it.
- If you did not pay or receive the same amount each month, add together the amounts you paid or received each month to report the annual amount.

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	Total Amount Paid

B. **Child support received:**

List the actual amount of any child support received 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	Amount of Child Support Received

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	Amount of Benefit Received

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Student's Name

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Student's ID

**D. Veterans non-education benefits:**

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

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

Name of Recipient	Type of Veterans Non-education Benefit	Amount of Benefit Received

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**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, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc.*

**Do not include the following items:**

- **Any items reported or excluded in A – D above.**
- **Student aid**
- **Earned Income Credit**
- **Additional Child Tax Credit**
- **Temporary Assistance to Needy Families (TANF)**
- **Untaxed Social Security benefits**
- **Supplemental Security Income (SSI)**
- **Workforce Investment Act (WIA)**
- **Educational benefits**
- **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	Amount of Other Untaxed Income Received

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**F. Money received or paid on the student's behalf:**

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

Purpose: e.g., Cash, Rent, Books	Amount Received	Source

Student's Name

Student's ID

**Additional information:**

So that we can fully understand the student's family's financial situation, please provide below information about any other resources, benefits, and other amounts received by the student and any members of the student's 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 the student's name and ID number at the top.

Name of Recipient	Type of Financial Support	Amount of Financial Support Received

**Additional details:**


**Certification and Signature:** Each person signing this form certifies that all the information reported here is complete and correct. The student must sign and date below. If the student is a dependent student for the purpose of applying for Federal Student Aid, then the parent signature and date is also required.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature (Required only if student is Dependent)

\_\_\_\_\_  
Date

**Financial Aid & Student Accounts Support Center**  
Call toll free 1.855-877-3944 or  
Visit <https://mysupport.sw.edu> or  
Call 276-964-7755 or 276-964-7756.