2017-2018 Verification of Other Untaxed Income for 2015

Your 2017-2018 FAFSA was selected for verification of *2015 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 _____ ID#_____

If the student was required to provide parental information on the FAFSA answer each question below as it applies to the student and the student's parent(s) whose information is on the FAFSA.

If the student was not required to provide parental information on the FAFSA, answer each question below as it applies to the student (and the student's spouse, if married) whose information is on the FAFSA.

IMPORTANT INFORMATION: You must list annual amounts below:

• 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 to report the annual amount.

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

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

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 in 2015

B. Child support received

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	Amount of Child Support Received in 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	Amount of Benefit Received in 2015

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 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-educational Benefit	Amount of Benefit Received in 2015

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 any items reported or excluded in A – D above. In addition, do not include 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 in 2015

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 in 2015. Include support from a parent whose information **was not reported** on the student's 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 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 2016-2017 FAFSA. Amount paid on the student's behalf also include any distribution 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 in 2015	Source (e.g., parent, grandparent)

G. 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.

Name of Recipient	Type of Financial Support	Amount of Financial Support Received in 2015

Additional details:

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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

This worksheet must be submitted to the
Snead State Community College
Financial Aid Office
P.O. Box 734
Boaz, Alabama 35957