

## **Other Untaxed Income Form**

2026-2027

M.I.

If the student was required to provide parental information on the FAFSA, answer each question below as it

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

Date of Birth

Student ID

Student First Name

applies to the student and the student's parent(s) whose information is on the FAFSA.

Student Last Name

area where an amount is requested.

	he student was not required to provide blies to the student (and the student's s	•	•		
<b>A.</b>	Payments to tax-deferred pension a List any payments (direct or withheld 401(k) or 403(b) plans), including, bu 12d with codes D, E, F, and S.  Name of Person Who Made th	I from earnings) to tax-deferred pens ut not limited to, amounts reported or	ion and retirement savings plans (e.g. n W-2 forms in Boxes 12a through		
	Ivallie of Fersoli willo wrade u	ie Fayilleiti 1012	Total Amount Laid in 2024		
<ul> <li>B. 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.</li> <li>Do not include the value of on-base military housing or the value of a basic military allowance for he Name of Recipient</li> <li>Type of Benefit Received</li> <li>Amount of Benefit Received</li> </ul>					
			2024		
C.	Veterans non-education benefits  List the total amount of veterans non-	advention handita received in 2024	Leale de Dischility Dooth Dongion		
	List the total amount of veterans non- Dependency and Indemnity Compens		· · · · · · · · · · · · · · · · · · ·		
	<b>Do not include</b> federal veteran's edu	· · · · · · · · · · · · · · · · · · ·			
	Assistance Program, VEAP Benefits,		<i>j</i> <b>61 2, 2 spende</b> =		
	Name of Recipient	Type of Veterans Non-educational Benefit	Amount of Benefit Received in 2024		

D. (	Other	untaxed	income
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List the amount of other untaxed income not reported and/or not specifically excluded according to the FAFSA directions on this form. Include untaxed income such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Schedule 1, Railroad Retirement Benefits, etc.

**Do not include** any items included or specifically 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 2024					

## E. 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 provided elsewhere on this form. Enter the total amount of cash support the student received in 2024. Include support from a parent whose information was not provided on the student's FAFSA, but do not include support from a parent whose information was provided on the FAFSA. 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 2026-2027 FAFSA.

	person is the student's parent whose in	<u>nformation</u>	is reported on t	<u>:he student's</u>	2026-2027 FAFSA	١.
	Purpose: e.g., Cash, Rent, Books	Amount I	Received in 2024	ŀ	Source	
						-
Stuc	Student's Hand-Signature		Date		Phone Number	
Pare	Parent's Hand-Signature (Dependent Students Only)		Date		Phone Number	-
	Taront S Traine Signature (Depondent Students Only)					