



Office of Financial Aid
2000 Fifth Avenue
River Grove, IL 60171
(708) 456-0300 ext.3155

2019-2020 Untaxed Income Verification Form

Parent's Information

Student's Information

As part of the required verification process, the Office of Financial Aid must reconfirm the dollar amounts that you listed as untaxed income on your Free Application for Federal Student Aid (FAFSA). Please indicate below the amounts you received from each source listed.

Student Name: _____ **Colleague ID #** _____

Use tables below to report annual amounts.

For the Parents' column, enter the amount for the student's parent(s). For the Student's column, enter the amount for the student (and spouse).

Parents' (Q93)	2017 Additional Financial Information	Student's (Q44)
\$ _____	a. Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040—line 50 or 1040A—line 33.	\$ _____
\$ _____	b. Child support paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your household, as reported in question 94	\$ _____
\$ _____	c. Taxable earnings from need-based employment programs, such as Fed. Work-Study and need-based employment portions of fellowships and assistantships.	\$ _____
\$ _____	d. Student grant and scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$ _____
\$ _____	e. Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q).	\$ _____
\$ _____	f. Earnings from work under a cooperative education program offered by a college.	\$ _____

Parents' (Q94)	2017 Untaxed Income	Student's (Q45)
\$ _____	a. Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S.	\$ _____
\$ _____	b. IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040-lines 28 plus 32 or 1040A-line 17.	\$ _____
\$ _____	c. Child support received for any of your children. Don't include foster care or adoption payments.	\$ _____
\$ _____	d. Tax exempt interest income from IRS Form 1040-line 8b or 1040A-line 8b.	\$ _____
\$ _____	e. Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	\$ _____
\$ _____	f. Untaxed portions of pensions from IRS Form 1040—lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	\$ _____
\$ _____	g. Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.	\$ _____
\$ _____	h. Veterans non education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$ _____
\$ _____	i. Other untaxed income not reported such as workers' compensation, disability, etc. don't include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, combat pay (if you are not a tax filer), benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$ _____
\$ _____	j. Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this	\$ _____

All information listed is accurate to the best of my knowledge. I understand there are penalties for providing false or misleading information on this form.

Student Signature _____ **Date** _____

Parent Signature _____ **Date** _____