2016-2017
Untaxed Income Worksheet for Student (and Spouse)

Student ID #: _____ Email: _____

Student's
Full Legal Name: _____ , _____
(**Please print clearly**) **Last** **First** **Middle**

Students – The information you provide will be used to update or correct the information provided on the Free Application for Federal Student Aid (FAFSA). If there are differences, our office will submit corrections to your FAFSA electronically. Please complete the worksheet below using amounts you received for the calendar year from January 1, 2015 through December 31, 2015**.**

Please provide the total amount for **2015** for any items which pertain to you. **Do not leave any lines blank.** Please answer all questions, using $0 if you have no amount to list for an item.	Spouse	Student
Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including but not limited to, amounts reported on the W2 Form in boxes 12a through 12d, codes D,E,F,G,H, and S.	$	$
IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040–line 28 + line 32 or 1040A–line 17.	$	$
Child support received for any of your children. **Don't include** foster care or adoption payments.	$	$
Tax exempt interest income from IRS Form 1040–line 8b or 1040A–line 8b.	$	$
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.	$	$
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.	$	$
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.	$	$
Veteran's non-educational benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	$	$
Other untaxed income not reported above such as workers' compensation, disability, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040 – line 25. **Do not include extended foster care benefits,** 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, benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	$	$
Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent whose financial information is not reported on this form and that is not part of a legal child support agreement.	$	$

If I purposely give false or misleading information on this worksheet, I may receive a fine, a prison sentence, or both. By signing this information request, I am certifying that all information is complete and correct.

Student Signature _____ **Date** _____
Electronic signature is not allowed

(Please Note: Email is not always a secure method of communication and may inadvertently expose your information if misdirected. Virginia Tech suggests using fax, U.S. Postal Service or personal delivery as a more secure method of delivery. If you choose to submit information through email, Virginia Tech will not be responsible for any exposure of data.)

Student Services Bldg (0222), Suite 200, 800 Washington Street SW, Blacksburg, VA 24061
www.finaid.vt.edu | finaid@vt.edu | ph: 540.231.5179 | fax: 540.231.9139