2015 Untaxed Income – Student (Dependent)

Student’s Name: ________________________________

Commodore ID: 000____________________ OR Last Four of SSN: XXX-XX-

It appears that your CSS PROFILE and FAFSA contain conflicting information; therefore, we are requesting that your parents confirm below the total amounts of untaxed income they received in 2015.

$_____________ Social Security benefits received for all household members that were not taxed.

$_____________ Temporary Assistance for Needy Families (TANF). Don’t include food stamps or subsidized housing.

$_____________ Child support received for any children. Don’t include foster care or adoption payments.

$_____________ Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S. Include untaxed payments to 401(k) and 403(b) plans.

$_____________ Veterans non-education benefits such as Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.

$_____________ 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.

$_____________ Any other untaxed income or benefits, such as workers’ compensation, disability, etc. Don’t include money from student financial aid, earned income credit, additional child tax credit, welfare payments, 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.

$_____________ TOTAL

Student’s Signature _____________________________ Date __________________

PLEASE RETURN THIS FORM TO THE OFFICE OF STUDENT FINANCIAL AID