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Student ID #	**Last Name**	**First Name**

2016-2017 PARENT'S 2015 UNTAXED INCOME
(Enter the combined amounts for your parent and their spouse)
Failure to complete this form will delay the processing of your aid.

Because verification of your other untaxed income and benefits is required, please complete the section below.

COMPLETE WITH THE AMOUNTS RECEIVED IN CALENDAR YEAR 2015
(LEAVE NOTHING BLANK-If a question does not apply, enter zero or DNA.)

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 Form in Box 12a through 12d, codes D, E, F, G, H, and S. _____
DON'T include amounts reported in Code DD (employer contributions toward employee health benefits).

Child support **received** for any of your children. **Don't include** foster care or adoption payments.   _____

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.

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

Other untaxed income not reported in items 44a-44h, 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, benefits from flexible
spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for
federal tax on special fuels.

REQUIRED PARENT SIGNATURES

By signing this worksheet, I (we) certify that all the information
reported to qualify for Federal student aid is complete and correct.

If married, spouse signature is required.

<div style="border:1px solid black">

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

</div>

_____
Parent's Signature   **Date**

_____
Parent Spouse's Signature   **Date**