

# VERMONT TECH

Office of Financial Aid

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## 2015-2016 Parent Untaxed Income Form

Student Name \_\_\_\_\_ Student ID No. \_\_\_\_\_  
Parent Name \_\_\_\_\_

### **What you should do:**

1. Complete and sign this form. Answer each section below as it applies to the student's parent(s) whose information is on the FAFSA. **If any item does not apply**, enter "N/A" for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested. **An incomplete form will be returned to you, which will delay your financial aid.**
2. To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2014, multiply that amount by the number of months in 2014 you paid or received it. If you did not pay or receive the same amount each month in 2014, add together the amounts you paid or received each month.
3. Send this completed form to the address above.
4. If you have any questions, please call our office at 800-965-8790

### **Please indicate if anyone in the household received one of the following for 2014.**

- Supplemental Security Income (SSI)  
 Temporary Assistance for Needy Families (TANF)

### **A. Payments to tax-deferred pension and retirement savings**

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g., 401(k) or 403(b) plans), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S.

Name of Person Who Made the Payment	Total Amount Paid in 2014

### **B. Child support received**

List the actual amount of any child support received in 2014 for the children in your household.

**Do not include** foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

Name of Adult Who Received the Support	Name of Child for Whom Support was Received	Amount of Child Support Received in 2014

### **C. 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.

**Do not include** the value of on-base military housing or the value of a basic military allowance for housing.

Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2014

**D. Veterans non-education benefits**

List the total amount of veterans non-education benefits received in 2014. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.

**Do not include** federal veterans educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill

Name of Recipient	Type of Veterans Non-education Benefit	Amount of Benefit Received in 2014

**E. Other untaxed income**

List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc.

**Do not include** any items reported or 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 2014

**Certifications and Signatures**

Each person signing below certifies that all the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

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

Student \_\_\_\_\_ Date \_\_\_\_\_

Parent \_\_\_\_\_ Date \_\_\_\_\_

Parent Email \_\_\_\_\_