

## 2021-22 Untaxed Income Verification Form

Please use your **2019** tax information and other **2019** calendar year information to complete all sections.

### A. Student Information

\_\_\_\_\_  
*First name*

\_\_\_\_\_  
*Last name*

\_\_\_\_\_  
*DU ID Number*

### B. Untaxed income information. If a category does not apply, write "0" or "N/A." **Form will be considered incomplete if fields are left blank.**

| Income Type   | Student | Parent |
|---|---------|--------|
| 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. Do not include code DD.   | \$      | \$     |
| IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS 1040—Schedule 1 line 28 or 32.   | \$      | \$     |
| Untaxed portions of IRA Distributions from IRS Form 1040—line [4a minus 4b]. Exclude rollovers. (If negative, enter 0.)   | \$      | \$     |
| Child support received for any of your children. Don't include foster care or adoption payments.  | \$      | \$     |
| Veterans non-education benefits received such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.<br><div style="text-align: right; margin-right: 50px;"><i>Type:</i> _____</div>   | \$      | \$     |
| Housing, food, and other living allowance paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Do not include the value of on-base military housing or the value of a basic military allowance for housing.<br><div style="text-align: right; margin-right: 50px;"><i>Type:</i> _____</div>  | \$      | \$     |
| Other untaxed income not yet reported including worker's compensation, disability, money or assistance from family or friends, untaxed alimony received, etc. Also include the portions of health savings accounts from IRS Form 1040—Schedule 1 line 12. (Do not include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplementary 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.)<br><div style="text-align: right; margin-right: 50px;"><i>Type:</i> _____</div> | \$      | \$     |

### C. Print and Sign this Worksheet

Each person signing this form certifies that all the information reported on it is complete and correct. **Parent signature required for dependent students.**

\*

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\*

\_\_\_\_\_  
Parent

\_\_\_\_\_  
Date