



# 2019-2020 Verification of Untaxed Income Form

Office of Financial Aid  
130 Student Union  
3640 Colonel Glenn Hwy.  
Dayton, OH 45435-0001  
Phone: (937) 775-4000  
E-mail: raiderconnect@wright.edu  
FAX: (937) 775-4410

This form is used to verify the Untaxed Income reported on the FAFSA (Student question 45 and Parent question 94). In general, these figures are not greater than the Adjusted Gross Income. Please confirm the amounts of the Untaxed Income reported on the FAFSA. Independent Students do not need to include parental data.

## A. Student Information

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name, M.I.

U	0	0							
---	---	---	--	--	--	--	--	--	--

\_\_\_\_\_  
Student Daytime Phone #

University ID (UID) - Required

	B. Untaxed Income	PARENT(S) 2017 AMOUNT (Dependent Students ONLY)	STUDENT/SPOUSE 2017 AMOUNT
a	<b>Payments to tax-deferred pension and retirement savings.</b> 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.	\$	\$
b	<b>IRA deductions and payments to self-employed SEP, SIMPLE Keogh and other qualified plans.</b> Reported on IRS Form 1040 on lines 28 + 32 or 1040A line 17.	\$	\$
c	<b>Child Support received.</b> List the actual amount of any child support received in 2017 for the children in your household.	\$	\$
d	<b>Tax exempt interest income.</b> Reported on IRS Form 1040 line 8b or 1040A line 8b.	\$	\$
e	<b>Untaxed portions of IRA distributions.</b> Reported on IRS Form 1040 lines (15a minus 15b) or 1040A lines (11a minus 11b). <b>Exclude rollovers.</b> <i>If amount negative, enter zero in the box.</i>	\$	\$
f	<b>Untaxed portions of pensions.</b> Reported on IRS Form 1040 lines (16a minus 16b) or 1040A lines (12a minus 12b). <b>Exclude rollovers.</b> <i>If amount negative, enter zero in the box.</i>	\$	\$
g	<b>Housing, food, and other living allowances paid to members of the military, clergy, and others.</b> Include cash payments and/or the cash value of benefits received.	\$	\$
h	<b>Veteran's non-education benefits.</b> List the total amount of veterans non-education benefits received in 2017. Include Disability, Death Pension or Dependency & Indemnity Comp. (DIC) and/or VA Educational Work Study allowances.	\$	\$
i	<b>Other untaxed income:</b> worker's compensation, disability, Railroad Retirement Benefits, etc. <b>Do not include:</b> welfare, social security, SSI, WIA educational benefits, financial aid or combat pay.	\$	\$
j	<b>Money received or paid on the student's behalf.</b> List any money received or paid on the student's behalf in 2017(e.g., payment of student's bills) and not reported elsewhere on this form.	<b>XXXXXX</b>	\$

C. Certification			
By signing this worksheet, I (we) certify that all information entered is complete and correct. <i>(Electronic signatures are not accepted)</i>			
	/ /		/ /
Student Signature (required)	Date	ParentSignature (if dependent student)	Date