2016-2017 Brandeis University
Untaxed Income Independent Verification Worksheet (V6)

Student's Name: _______________________________  Student ID: ____________

Instructions: Please provide the following information concerning untaxed income for the calendar year 2015.

Note: If an answer is "zero" write a "0". If you leave items blank, this form will be considered incomplete and will be returned to you. If you receive income from any of the following sources, please provide appropriate documentation.

Do not include: 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.

Student/Spouse  Untaxed Income

$__________ Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported (but not limited to) on the W-2 Forms in Box 12 a-d, codes D,E,F, G,H, and S.

$__________ Child support received for all children listed on the FAFSA.

$__________ Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value benefits).

$__________ Veteran’s non-educational benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) and/or VA Educational Work-Study Allowances.

$__________ Any other untaxed income such as worker’s compensation, disability, etc. Indicate type of benefit: ________________________________

$__________ *Money Received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.

*List any money received by or paid on the student’s behalf (e.g., if someone is paying rent, utility bills, etc., for the student or gives cash, gift cards, etc.) not reported elsewhere on this form. Enter the total amount of cash support the student received in 2015. Amounts paid on the student’s behalf also include any distributions to the student from a 529 plan owned by someone other than the student or the student’s parents, such as grandparents, aunts, and uncles.

I certify that the information included on this form is true and I am willing to provide additional documentation if requested. You (and your spouse, if you are married) must sign below.

_____________________________  __________________________
Student’s Signature  Date

_____________________________  __________________________
Spouse Signature (if married)  Date