



2023-2024 Untaxed Income Verification

Student Name: _____

COTC ID:

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If the student was required to provide parental information on the FAFSA, answer each question below as it applies to the student and the student's parent(s) whose information is on the FAFSA.

If the student was not required to provide parental information on the FAFSA, answer each question below as it applies to the student (and the student's spouse, if married) whose information is on the FAFSA.

If any item does not apply, enter "0". To determine the correct annual amount for each item: If you received the same dollar amount every month in 2021, multiply the amount by the number of months in 2021 you received it. If you did not receive the same amount each month in 2021, add together the amounts you received each month. **DO NOT leave blanks.**

\$_____ Child support received for any of your children. Provide **official documentation** from an official agency showing the amount received from **01/01/21 through 12/31/21**. **Do not include** foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

\$_____ Amount received in 2021 for housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and 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.

\$_____ Amount of veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances received in 2021. **Do not include** federal veteran's educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, and Post 9/11 GI Bill.

\$_____ Other untaxed income received in 2021 not reported elsewhere, such as workers' compensation, alimony, disability, Black Lung Benefits, **untaxed portions of health savings accounts from IRS Form 1040 Schedule 1 Line 13**, Railroad Retirement Benefits, etc. **Do not include** extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, 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.

\$_____ Money received in 2021, or paid on your behalf (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent whose financial information is not reported on this form and that is not part of a legal child support agreement. Include 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 of the student and non-custodial parents.

Student Signature (Required. **DO NOT SIGN ELECTRONICALLY**) _____

Date _____

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

Parent Signature (Required if dependent student)
(**DO NOT SIGN ELECTRONICALLY**) _____

Date _____

TO RETURN THIS FORM: Email to: NWK-studentfinancialservices@mail.cotc.edu (or) Fax to: 740-364-9533 (or) Mail to: COTC, Student Financial Services, 1179 University Dr, Newark OH 43055

All documents and forms submitted to Student Financial Services become the property of Central Ohio Technical College and cannot be copied or returned to the student, spouse, or parent (i.e. tax transcripts, verification worksheets, W2s, etc.)

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