Student Name	S	Student PID (Pxxxxxxxxx)	
Written Student Signature (Electronic Signature Not Accepted)		Date	
Written Parent Signature (Electronic Signature Not Accepted)Date(Parent signature required for dependent students)Date		te	
complete both the studer exclusion , <u>enter zero</u> . Do	ome and/or exclusions received or reported in the y at and parent columns. Please list ANNUAL amount o not leave any lines blank . Visit <u>https://www.ohio.e</u> ing our Secure Upload Portal, mailing, or faxing.	s. If you did not receive a type	
Student/Spouse	Untaxed Income*	Parent	
\$		\$	
\$	plans (From W-2 box 12a-12d codes D, E, F, G, H, and S) Child support received for all children by yourself, spouse and/or your parent(s)	\$	
\$		\$	
\$		\$	
\$		\$	
\$		Not Applicable	
Student/Spouse	Income Exclusions	Parent	
\$	Child support paid by yourself, spouse, or your parent(s)	\$	
\$		\$	
\$		\$	
\$		\$	
\$		\$	

Untaxed Income and Exclusions Form

2023-2024

UNIVERSITY

***Do not include** untaxed income such as financial aid received, earned income credit, child tax credit, welfare payments, social security benefits, Workforce Investment Act benefits, combat pay (if taxed), flexible spending arrangement benefits, foreign income exclusion, or credit for federal tax on special fuels anywhere on this form.

Office of Student Financial Aid and Scholarships Chubb Hall 020 1 Ohio University Drive Athens, OH 45701-2979 financial.aid.verification@ohio.edu www.ohio.edu/financial-aid Phone (740)593-4141 Fax (740)593-4140