



OHIO
UNIVERSITY

**Untaxed Income and Exclusions Form
2020-2021**

Student Name

Student PID (Pxxxxxxxx)

Student Signature

Date

Parent Signature (if applicable)

Date

Please list all untaxed income and/or exclusions received or reported in the year **2018**. **Please list ANNUAL amounts.**

If you did not receive a type of benefit or exclusion, enter zero. Do not leave any lines blank.

Student/Spouse	Untaxed Income*	Parent
\$ _____	Payments to tax-deferred pension/savings 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)	\$ _____
\$ _____	Housing, food, and other living allowances paid to military, clergy, etc.	\$ _____
\$ _____	Veterans' noneducation benefits (i.e. Disability, Death Pension, DIC)	\$ _____
\$ _____	Untaxed income not reported elsewhere (i.e. Worker's Comp, Disability other than SSI, Refugee Assistance)	\$ _____
\$ _____	Cash received or any money paid on your behalf	<u>Not Applicable</u>

Student/Spouse	Income Exclusions	Parent
\$ _____	Child support paid by yourself, spouse, or your parent(s)	\$ _____
\$ _____	Taxable earnings from need-based employment (i.e. Federal Work Study)	\$ _____
\$ _____	Taxable student grants, scholarship, fellowship (Reported to IRS in your AGI)	\$ _____
\$ _____	Combat/special combat pay included in your Adjusted Gross Income	\$ _____
\$ _____	Earnings from work under a cooperative education program offered by a college	\$ _____

***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 you are a tax filer), flexible spending arrangement benefits, foreign income exclusion, or credit for federal tax on special fuels anywhere on this form.