

Converse University – Student Financial Services 2023-2024 UNTAXED INCOME FORM

Converse ID: _____

Please provide the following information for the **2021** calendar year (January 1, -December 31, 2021). If an item does not apply to you, enter "0". **Each blank must have a response.**

		Student (& Spouse if married)	Parent(s) (if dependent)
Child support <u>received</u> for any children. Don't include foster care or adoptio	n payments.		
Housing, food, and other living allowances paid to members of the military, cl (including cash payments and cash value of benefits). Don't include the value of housing or the value of a basic military allowance for housing.	0.		
Veteran's non-education benefits , such as Disability, Death Pension or Depen Compensation (DIC) and/or VA Educational Work Study allowances.	dency & Indemnity		
Any other untaxed income and benefits, such as workers' compensation, disal untaxed portions of health savings accounts from IRS Form 1040-line 25. Don't care benefits, student aid, earned income credit, additional child tax credit, welfa Social Security benefits, SSI, WIA educational benefits, combat pay, benefits fr arrangements, foreign income exclusion or credit for federal tax on special fuels	include extended foster are payments, untaxed om flexible spending		
Money received or paid on your behalf (e.g. bills), not reported elsewhere on this form or the FAFSA. This includes money that you received from a non-custodial parent that is not part of a legal child support agreement.			Not Applicable
Student Signature	Date		
Spouse Signature(if married)	Date		
Parent's Signature	Date		

(if dependent)