



**D. VETERANS' NON-EDUCATION BENEFITS**

List the total amount of veterans' non-education benefits received in 2019. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and VA Educational Work-Study allowances.

**Do not include** federal veterans' educational benefits such as: Post-9/11 GI Bill, Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits.

Name of Parent Who Received the Benefit	Type of Benefit Received	Annual Amount of Benefit Received in 2019
		\$
		\$

**E. OTHER UNTAXED INCOME NOT REPORTED IN THIS SECTION**

List any other untaxed income not reported elsewhere on this form, such as workers' compensation, disability, etc., including untaxed portions of health savings accounts from IRS Form 1040–line 25.

**Do not** include extended foster care benefits, student aid, earned income credit, additional child tax credit, TANF, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax special fuels.

Name of Parent Who Received the Untaxed Income	Description of Untaxed Income	Annual Amount Received in 2019
		\$

**F. MONEY OR CASH THAT PARENTS RECEIVED IN 2019 FROM OTHERS OR AMOUNT OF PARENTS' BILLS THAT WERE PAID BY SOMEONE ELSE**

List any money you received or any of your bills paid for you by someone else during 2019. Examples include the amount someone else paid for your rent, utility bills, car payments, or other bills that were in your name, as well as gifts of money or gift cards.

Name of Parent Who Received Benefit	Source of Money or Benefactor Who Paid Parents' Bills	Purpose/Description	Annual Amount in 2019
			\$
			\$

By signing this form, you are certifying that the information reported is correct and complete.

\_\_\_\_\_  
*Student signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent signature*

\_\_\_\_\_  
*Date*