



# Pepperdine University, Seaver College

## Office of Financial Assistance

### 2015-2016 Untaxed Income Information

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that during the verification process, we may ask you to confirm the information that you reported on your FAFSA. We will compare your FAFSA data to the information provided on this worksheet and to any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, as well as attach any required documentation and return to the Office of Financial Assistance.

#### A. STUDENT INFORMATION

Student Name: \_\_\_\_\_ CWID#: \_\_\_\_\_

Last                                  First                                  M.I.

  

Student's: \_\_\_\_\_

Date of Birth                                  Email Address                                  Home or Cell Phone Number

#### B. Student Household Resources – 2014 Untaxed Income

**\*Please put N/A if Not Applicable. DO NOT LEAVE ANY BLANKS.**

Enter the combined amounts for you and your spouse, if applicable.

		Amount
a.	Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S. Don't include amounts reported in code DD (employer contributions toward employee health benefits).	
b.	Child support received for any of your children. Don't include foster care or adoption payments.	
c.	Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	
c.1.	Rollover Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered "Yes" to having a rollover, please submit a copy of your 1099R form to the office.	
d.	Untaxed portions of pensions from IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	
d.1.	Rollover Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered "Yes" to having a rollover, please submit a copy of your 1099R form to the office.	
e.	Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.	
f.	Veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	
g.	Other untaxed income not reported in items 45a through 45h, such as workers' compensation, disability, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040-line 25. Don't include extended foster care benefits, student aid, earned income credit, additional child tax credit, 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 on special fuels.	
h.	Money received, 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.	

Return To:

Pepperdine University • Seaver College • Office of Financial Assistance

24255 Pacific Coast Highway • Malibu • California • 90263-4301 • Phone (310) 506-4301 • Fax (310) 506-4746

Email: [finaid2@pepperdine.edu](mailto:finaid2@pepperdine.edu)

**C. Parent Household Resources for DEPENDENT STUDENTS ONLY – 2014 Untaxed Income**

**\*Please put N/A if Not Applicable. DO NOT LEAVE ANY BLANKS.**

Enter the amounts for your parent[s].

Amount

a.	Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S. Don't include amounts reported in code DD (employer contributions toward employee health benefits).	
b.	Child support received for any of your parents' children. Don't include foster care or adoption payments.	
c.	Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	
c.1.	Rollover Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered "Yes" to having a rollover, please submit a copy of your 1099R form to the office.	
d.	Untaxed portions of pensions from IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	
d.1.	Rollover Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered "Yes" to having a rollover, please submit a copy of your 1099R form to the office.	
e.	Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.	
f.	Veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	
g.	Other untaxed income not reported in items 94a through 94h, such as workers' compensation, disability, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040-line 25. Don't include extended foster care 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 on special fuels.	

**D. Certification and Signature**

I/we certify that all of the information reported on this worksheet is complete and correct. Each person signing this worksheet certifies that all of the information reported on it is complete and correct. A parent must sign and date if the student is dependent. The student **must** sign this worksheet.

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

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature (Dependent Students Only)

\_\_\_\_\_  
Date

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