



TECHNICAL COLLEGE  
OF THE LOWCOUNTRY

Financial Aid Office  
921 Ribaut Road-PO BOX 1288  
Beaufort, S.C. 29901-1288  
Phone 843.470.5961  
Fax 843.525.8285  
[www.tcl.edu](http://www.tcl.edu)  
financialaid@tcl.edu

**2019-2020 UNTAXED INCOME FORM**

Student Name \_\_\_\_\_ TCL Student ID \_\_\_\_\_

Please provide the following information for the **2017** calendar year (January-December, 2017). If an item does not apply to you, enter "0". **Each blank must have a response.**

Items	Student (& Spouse if Married)	Parent (if dependent)
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported in the W-2 Form in Boxes 12a-12d, codes D, E, F, G, H and S. <b>Do not include amounts reported in code DD (employer contributions toward employee health benefits).</b>		
IRA deductions and payments to self-employed SEP, IMPLE, and KEOGH and other qualified plans from Form 1040-total of lines 28 + 32 <b>or</b> 1040A-line 17.		
Child support received for all children. Don't include foster care or adoption payments.		
Tax exempt interest income from Form 1040, line 8b or 1040A, line 8b.		
Untaxed portions of IRA distributions from 1040- lines (15a minus 15b) <b>or</b> 1040A- lines (11a minus 11b). <b>Exclude rollovers.</b> If negative, enter "0".		
Untaxed portions of pensions from 1040- lines (16a minus 16b) or 1040A- lines (12a minus 12b). Exclude rollovers. If negative, enter "0".		
Housing, food, and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). <b>Don't include</b> the value of on-base military housing or the value of a basic military allowance for housing.		



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Items	Student (& Spouse if Married)	Parent (if dependent)
Veterans' non-education benefits, such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work Study allowances.		
Other untaxed income and benefits, such as workers' compensation, disability, etc. Include the untaxed portions of health savings accounts from IRS Form 1040-line 25. <b>Do not include</b> extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, SSI, WIA educational benefits, combat pay, benefits from flexible spending arrangements, foreign income exclusion or credit for federal tax on special fuels.		
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.		

I certify that all of the information reported on this form is complete and correct.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_  
(if married)

Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_  
(if dependent)

Date \_\_\_\_\_