

**Parent(s)' 2020 Untaxed Income Worksheet** (UTXP20)

**Instructions:** Parent(s) please complete this worksheet reporting sources of untaxed income that you received in 2020. Do not report monthly amounts. Write in calendar year 2020 values. If your answer to any item is “none” or “zero,” write a “0” in the space provided.

**Do not leave any item blank. This form must be signed.**

<b>Payments to tax-deferred pension and retirement savings plans</b> (paid directly or withheld from earnings), including but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes <b>D, E, F, G, H and S [401(k), 403(b), 408(k)(6), 501(c)(18)(D), 457(b) and 408(p) SIMPLE plans]</b> . Do <b>not</b> include amounts reported as code DD (employer contributions toward employee health benefits).	\$
<b>Child support received</b> for all children. Do not report monthly amounts; write in the total received for 2020. Report payments received as a result of court order as well as voluntarily provided.	\$
<b>IRA deductions and payments to self-employed SEP, SIMPLE, Keogh</b> and other qualified plans from IRS Form 1040 Schedule 1 —total of lines 15 + 19.	\$
<b>Untaxed portions of IRA and Pension Distributions (exclude rollovers)</b> from IRS Form 1040 — Line 4a minus 4b plus 4c minus 4d.	\$
<b>Tax exempt interest income</b> from IRS Form 1040—Line 2a.	\$
<b>Housing, food and other living allowances</b> paid to members of the military, clergy and others. Include 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.	\$
<b>Veterans' noneducation benefits</b> such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.	\$
<b>Health savings account deduction</b> from IRS Form 1040 Schedule 1 — Line 12.	\$
<b>Any other untaxed income and benefits</b> not reported elsewhere, such as workers' compensation, disability benefits (not Social Security), etc. List source(s): _____	\$

**Do not include:** Unemployment compensation, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security, SSI, Workforce Investment Act educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), adoption payments, extended foster care benefits, foreign income exclusion or credit for federal tax on special fuels.

Parent's Signature: \_\_\_\_\_

Print Student's Name: \_\_\_\_\_ Michigan Tech ID#: M \_\_\_\_\_

Please return the completed form by one of the following methods to:  
 Michigan Technological University, Student Financial Services Center  
 Upload through [mymichigantech.mtu.edu](http://mymichigantech.mtu.edu)  
 Fax Number: 906-487-3042  
 Mailing Address: 1400 Townsend Dr., Houghton, MI 49931-1295