

## Office of Financial Aid Verification of Untaxed Income Form

			Student	ID#		
ome Phone	Cell I	Phone	E-mail <i>A</i>	Address		
art 1: Instructions: 0	Check off any of t	he following	income sources th	at you or a me	ember of your household re	eceived
	ntal Nutrition Ass	sistance Progr	ram ( SNAP) Bene	fits		
☐ Medicaid	or Supplemental	Social Securi	ty benefits (SSI)			
☐ Special Sup	oplemental Nutri	tion Program	for Women, Infar	its, and Childre	en(WIC)	
☐ Temporary	Assistance for N	leedy Familie	s (TANF)			
		•				
response is requeste  Payments to tax-c List any payments 401(k) or 403(b) pla	d, or enter 0 in and deferred pension (direct or withhel ans), including, b	n area where n and retirem d from earnin	an <u>amount</u> is required savings gs) to tax-deferred	rested. All amo	enter "N/A" for Not Applical bunts should be reported a retirement savings plans (e ms in Boxes 12a through 1	nnually .g.,
codes D, E, F, G, F	H, and S.					
Name -	6 Danasa \ \A/Ia a \ B	A = al = 1 la =	T-1-1 A	( Daid	Polationahin to	
Name o	f Person Who N Payment	Made the	Total Amou		Relationship to Student	
Name o		Made the				
Name o		Made the				
. Child support rece	Payment  eived  ount of any child s	support receiv	in 202	children in you	Student  Ir household. <b>Do not inclu</b>	ude fos
Child support rece List the actual amo care payments, add	Payment  eived  ount of any child soption payments.  Adult Who	support receiv or any amou	in 202  yed in 2019 for the int that was court-on thild For Whom	children in you ordered but no	Student  Ir household. <b>Do not inclu</b> actually paid.  Child Support Received	u <b>de</b> fos
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Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2022

'	/EAP Benefits, Post-9/11 GI Bill.	Type of Veter	ans	Amount of Benefit	
	Name of Recipient	Non-education I		Received in 2022	
L ii f C A	Other untaxed income List the amount of other untaxed income such as workers' compensation IRS Form 1040 Line 25, Railrow Diabove. In addition, do not include Assistance to Needy Families (TANF Workforce Investment Act (WIA) edue.g., cafeteria plans), foreign incom	ion, disability, Black Lung Bo nd Retirement Benefits, etc. student aid, Earned Income F), untaxed Social Security b cational benefits, combat pa	enefits, uni <b>Do not ind</b> Credit, Adendits, Suenefits, Suenefits, Suenefits	taxed portions of health saving clude any items reported or ex ditional Child Tax Credit, Templemental Security Income (Se from flexible spending arrang	s accounts cluded in <i>F</i> porary SSI),
	Name of Recipient	Type of Other Untaxed Income		ount of Other Untaxed ome Received in 2022	
L	Money received or paid on the stu list any money received or paid on to on this form. Enter the total amount	he student's behalf (e.g., pa of cash support the student i	eceived in	2021. Include support from a	parent
L V V C V	ist any money received or paid on t	he student's behalf (e.g., pa of cash support the student in on the student's 2023–24 Find example, if someone is pay ount of that person's contribution the student's 2023–24 FAF ont from a 529 plan owned by	eceived in AFSA, but ing rent, u itions <b>unle</b> SA. Amo v someone	do not include support from a do not include support from a tility bills, etc., for the student cess the person is the student unts paid on the student's behavior	parent parent or gives t's parent alf also
L V V C V	List any money received or paid on to this form. Enter the total amount whose information was not reported whose information was reported. For each, gift cards, etc., include the amount whose information is reported on include any distributions to the students.	the student's behalf (e.g., pa of cash support the student in on the student's 2023–24 Far example, if someone is pay ount of that person's contribution the student's 2023–24 FAF int from a 529 plan owned by s, and uncles of the student.	eceived in AFSA, but ing rent, u itions unle SA. Amo someone	do not include support from a do not include support from a tility bills, etc., for the student cess the person is the student unts paid on the student's behavior	parent parent or gives t's parent alf also
L V V C V	List any money received or paid on the on this form. Enter the total amount whose information was not reported whose information was reported. For each, gift cards, etc., include the am whose information is reported on include any distributions to the stude parents, such as grandparents, aunt	the student's behalf (e.g., pa of cash support the student in on the student's 2023–24 Far example, if someone is pay ount of that person's contribution the student's 2023–24 FAF int from a 529 plan owned by s, and uncles of the student.	eceived in AFSA, but ing rent, u itions unle SA. Amo someone	do not include support from a do not include support from a tility bills, etc., for the student cess the person is the student unts paid on the student's behind other than the student or	parent parent or gives t's parent alf also
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Student Name \_\_\_\_\_ Student ID\_\_\_\_\_