

Office of Financial Aid Verification of Untaxed Income Form

ome Phon	eCell	Phone	E-mail <i>A</i>	Address	
art 1: Ins	tructions: Check off any of	the following	income sources th	nat you or a mer	mber of your household recei
	Supplemental Nutrition As	sistance Progr	ram (SNAP) Bene	fits	
	Medicaid or Supplementa	l Social Securi	ty benefits (SSI)		
	Special Supplemental Nutr	_		nts, and Childrer	n(WIC)
	Temporary Assistance for	•	· ·		
	Other: Please list:				
Payme List any 401(k)	narried) whose information in its requested, or enter 0 in a enter to tax-deferred pension payments (direct or withher	s on the FAFS in area where in and retirem Id from earnin	SA. If any item do an amount is requ nent savings gs) to tax-deferred	es not apply, e uested. All amo	o the student (and the studen nter "N/A" for Not Applicable was should be reported annual etirement savings plans (e.g., as in Boxes 12a through 12d was should be the student of the student savings plans (e.g., as in Boxes 12a through 12d was should be student of the student of the student savings plans (e.g., as in Boxes 12a through 12d was should be student of the student of t
	Name of Person Who	Made the	Total Amou		Relationship to
_	Name of Person Who Payment	Made the	Total Amou in 202		Relationship to Student
List the	Payment support received	support receiv	in 202	children in your	Student household. Do not include
List the	Payment support received actual amount of any child	support receiv	in 202	children in your	Student household. Do not include actually paid.
List the	Payment support received actual amount of any child ayments, adoption payments	support receiv , or any amou	in 202	children in your	Student household. Do not include
List the	Payment support received actual amount of any child ayments, adoption payments Name of Adult Who	support receiv , or any amou	in 202 red in 2019 for the ant that was court-on-	children in your	household. Do not include actually paid.
List the	Payment support received actual amount of any child ayments, adoption payments Name of Adult Who	support receiv , or any amou	in 202 red in 2019 for the ant that was court-on-	children in your	household. Do not include actually paid.

housing or the value of a basic military allowance for housing.

Amount of Benefit Received

Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2021

	VEAP Benefits, Post-9/11 GI Bill.	Type of Vete	ans	Amount of Benefit	
	Name of Recipient	Non-education	Benefit	Received in 2021	
	Other untaxed income List the amount of other untaxed income such as workers' compensation IRS Form 1040 Line 25, Railros D above. In addition, do not include Assistance to Needy Families (TANI) Workforce Investment Act (WIA) edu (e.g., cafeteria plans), foreign incom	cion, disability, Black Lung B ad Retirement Benefits, etc. student aid, Earned Income F), untaxed Social Security b acational benefits, combat pa	enefits, unt Do not inc Credit, Ad enefits, Su ay, benefits	axed portions of health savin clude any items reported or e ditional Child Tax Credit, Ter applemental Security Income from flexible spending arran	igs accounts excluded in A – mporary (SSI),
	Name of Recipient	Type of Other Untaxed Income		ount of Other Untaxed ome Received in 2021]
F	Money received or naid on the stu	ident's hehalf			
	Money received or paid on the stu- List any money received or paid on to on this form. Enter the total amount whose information was not reported whose information was reported. Fo cash, gift cards, etc., include the am whose information is reported on include any distributions to the stude parents, such as grandparents, aunit	he student's behalf (e.g., pa of cash support the student on the student's 2023–24 F. r example, if someone is pay ount of that person's contrib the student's 2023–24 FAI ent from a 529 plan owned b	received in AFSA, but ring rent, u utions unle F SA . Amo y someone	2021. Include support from a do not include support from a tility bills, etc., for the studentess the person is the studentents paid on the student's be	a parent a parent t or gives nt's parent half also
	List any money received or paid on this form. Enter the total amount whose information was not reported whose information was reported. Fo cash, gift cards, etc., include the am whose information is reported on include any distributions to the students.	he student's behalf (e.g., pa of cash support the student on the student's 2023–24 F. r example, if someone is pay ount of that person's contribe the student's 2023–24 FAI ent from a 529 plan owned b s, and uncles of the student	received in AFSA, but ring rent, u utions unle FSA. Amo y someone	2021. Include support from a do not include support from a tility bills, etc., for the studentess the person is the studentents paid on the student's be	a parent a parent t or gives nt's parent half also
	List any money received or paid on the form. Enter the total amount whose information was not reported whose information was reported. Fo cash, gift cards, etc., include the am whose information is reported on include any distributions to the stude parents, such as grandparents, aunt	he student's behalf (e.g., pa of cash support the student on the student's 2023–24 F. r example, if someone is pay ount of that person's contribe the student's 2023–24 FAI ent from a 529 plan owned b s, and uncles of the student	received in AFSA, but ring rent, u utions unle FSA. Amo y someone	2021. Include support from a do not include support from a tility bills, etc., for the student ess the person is the student unts paid on the student's be other than the student or the	a parent a parent t or gives nt's parent half also
	List any money received or paid on the form. Enter the total amount whose information was not reported whose information was reported. Fo cash, gift cards, etc., include the am whose information is reported on include any distributions to the stude parents, such as grandparents, aunt	he student's behalf (e.g., pa of cash support the student on the student's 2023–24 F. r example, if someone is pay ount of that person's contribe the student's 2023–24 FAI ent from a 529 plan owned b s, and uncles of the student	received in AFSA, but ring rent, u utions unle FSA. Amo y someone	2021. Include support from a do not include support from a tility bills, etc., for the student ess the person is the student unts paid on the student's be other than the student or the	a parent a parent t or gives nt's parent half also
	List any money received or paid on this form. Enter the total amount whose information was not reported whose information was reported. Fo cash, gift cards, etc., include the am whose information is reported on include any distributions to the stude parents, such as grandparents, aunit	he student's behalf (e.g., pa of cash support the student on the student's 2023–24 F. r example, if someone is pay ount of that person's contribe the student's 2023–24 FAI ent from a 529 plan owned b s, and uncles of the student	received in AFSA, but ring rent, u utions unle FSA. Amo y someone	2021. Include support from a do not include support from a tility bills, etc., for the student ess the person is the student unts paid on the student's be other than the student or the	a parent a parent t or gives nt's parent half also
Cor	List any money received or paid on this form. Enter the total amount whose information was not reported whose information was reported. Fo cash, gift cards, etc., include the am whose information is reported on include any distributions to the stude parents, such as grandparents, aunit	he student's behalf (e.g., pa of cash support the student on the student's 2023–24 F. r example, if someone is pay ount of that person's contrib the student's 2023–24 FAI ent from a 529 plan owned b s, and uncles of the student oks Amount Received in	received in AFSA, but ring rent, u utions unle FSA. Amo y someone	2021. Include support from a do not include support from a tility bills, etc., for the student ess the person is the student unts paid on the student's be other than the student or the	a parent a parent t or gives nt's parent half also

Student Name _____ Student ID_____