

2011-2012 Untaxed Income Verification

Student's name _____

SSN or Tech ID _____

Through the process of verification our office has discovered inconsistencies between the information you submitted on the Federal Student Aid Application (FAFSA) and the verification worksheet. Please complete this form with annual amounts and return to the Office of Financial Aid.

***** Please indicate correct value below *****

Calendar Year 2010

Enter yearly total amounts to the nearest whole dollars or if the amount is zero, please enter 0.

Student/Spouse

Parent/Stepparent

\$ _____	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on W-2 form in Box 12a -12d, Codes D,E,F,G,H, and S. Include untaxed portions of 401(k) and 403(b) plans	\$ _____
\$ _____	Deductible IRA and/or Keogh, SEP, or SIMPLE payments found on IRS Form 1040 - total of lines 28 plus 32; or line 1040A line 17	\$ _____
\$ _____	Child support received for all children. Don't include foster care or adoption payments	\$ _____
\$ _____	Tax exempt interest income from IRS Form 1040-line 8b; or 1040A-line 8b	\$ _____
\$ _____	Untaxed portions of IRA Distributions from IRS 1040-(line 15a minus 15b); or 1040A - (line 11a minus 11b), excluding rollovers	\$ _____
\$ _____	Untaxed portions of pensions from IRS 1040-(line 16a minus 16b); or 1040A - (line 12a minus 12b), excluding rollovers.	\$ _____
\$ _____	Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits)	\$ _____
\$ _____	Veteran's non-education benefits, such as Death Pension or Dependency & Indemnity Compensation (DIC) and/or VA Educational work study allowances	\$ _____
\$ _____	Other untaxed income such as workers' compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, Refugee Assistance, etc. Don't include student aid, Workforce Investment Act educational benefits, combat pay, earned income credit, SSI untaxed Social Security benefits, benefits from flexible spending arrangements (e.g, cafeteria plans), additional child tax credit, welfare payments, foreign income exclusion or credit for federal tax on special fuels	\$ _____
\$ _____	Cash received or any money paid on your behalf, not reported elsewhere on this form	XXXXXXXX
\$ _____	Student (and Spouse) Total	Parent/Stepparent Total \$ _____

Student Signature _____

Parent/Stepparent Signature _____

Mail completed form to: M State Central Financial Aid, PO Box 309, Perham MN 56573

