SUNTAX

MISSISSIPPI STATE UNIVERSITY™
STUDENT FINANCIAL AID

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2021-2022
Student Untaxed Income Verification

_____ _____ 9 ___ ___ ___ ___ ___ ___ ___ ___

Student's Name **Student's MSU Net ID** **MSU ID (9 digit)**

We received your 2021-2022 FAFSA. The information on this FAFSA should be based on your 2019 income. Please complete the following items pertaining to untaxed income you received for 2019. If you received no untaxed income, then write "0" in the space provided. **Do not leave any lines blank.**

Asset	Value
PAYMENTS TO TAX-DEFERRED PENSIONS Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S.	$
CHILD SUPPORT Child support received for any of your children. Do not include foster care or adoption payments.	$
HOUSING AND LIVING ALLOWANCES Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Do not include the value of on-base military housing or the value of basic military allowance for housing.	$
VETERANS BENEFITS Veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	$
OTHER BENEFITS Other untaxed income not reported in items 44a through 44i, such as workers' compensation, disability payments (**NOT** Social Security Disability), Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040, Line 25, Railroad Retirement Benefits, etc.	$
DO NOT INCLUDE: Student aid/financial aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	
SOCIAL SECURITY INCOME Social Security Disability, Untaxed Social Security benefits, Supplemental Security Income	$
OTHER SOURCES OF INCOME Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form.	$

Student Certification Statement

Signature *(Note: Signature MUST BE HANDWRITTEN; an electronic signature will not be accepted.)*

By signing this form, I certify that all the information on this form and any attachments are complete and accurate to the best of my knowledge. ***Warning: Purposely giving false or misleading information may result in a fine, imprisonment, or both.***

Student Signature _____ **Date** _____

(Required for all students)