

## 2009-2010 FINANCIAL AID UNTAXED INCOME WORKSHEET

Student Name: \_\_\_\_\_ ID#: \_\_\_\_\_

There may be conflicting information on the 2008 untaxed income you reported on your financial aid application and on your verification sheet. Please fill out the worksheet below. You must complete each line below. **DO NOT LEAVE ANY LINE ON THE FORM BLANK.** Incomplete forms will be returned and will delay the processing of your financial aid award. If you are a dependent student, you must include parental information.

Student & Spouse	Untaxed Income	Parent
\$ /yr	Housing, food and other living allowances paid to members of the military ( <b>BAS/BAH</b> ), clergy, and others (including cash payments and cash value of benefits). If you, your spouse or parents were active duty military in 2008 please submit a copy of your LES.	\$ /yr
\$ /yr	Child support received for all children. <b>DO NOT</b> include foster care or adoption Payments.	\$ /yr
\$ /yr	Workers' Compensation	\$ /yr
\$ /yr	Veteran's non-education benefits such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances	\$ /yr
\$ /yr	Any other untaxed income or benefits not reported on this form. <b>DO NOT</b> include student aid, earned income tax credit, welfare payments, untaxed Social Security benefits, SSI, Workforce Investment Act educational benefits, combat pay, or benefits from flexible spending arrangements, (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels	\$ /yr
\$ /yr	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reports on the W-2 form in Boxes 12a through 12d, codes D, E, F, G, H and S	\$ /yr
\$ /yr	Cash received, or any money paid on your behalf, not reported elsewhere on this form	\$XXXXXXXX

Other (please explain): \_\_\_\_\_

As certified by the signatures below, all the information provided by myself and/or others is true and complete to the best of my (our) knowledge. I understand that the Financial Aid Office may request additional documentation to verify the above information. Note: If you are a dependent student, you and a parent must sign this form; if you are married, you and your spouse must sign.

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Spouse Date

\_\_\_\_\_  
Father/Stepfather Date

\_\_\_\_\_  
Mother/Stepmother Date

Return form to:

**Financial Aid Office**  
MSU-Great Falls COT; 2100 16<sup>th</sup> Ave South; Great Falls, MT; 59405  
[406]771-4334 [800]446-2698 Fax [406]771-4410  
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