



2022-23 Untaxed Income Information Form

Student ID #	
Last Name	
First Name	
Date of Birth (mm/dd/yyyy)	
Telephone #	

Note: Use student's legal name, not nicknames (i.e. Robert- not Bobby, Bob, Robby, or Rob)

On your 2022-2023 FAFSA, you reported Untaxed Income. Complete this form to clarify the information you reported on your FAFSA.

Please list the amount received in 2020 for each of the items in the chart below. Please use **yearly totals**, not monthly amounts. **Do not leave anything blank.** If no income was received from the source listed, write "0".

- The verification process may take SEVERAL WEEKS and your federal financial aid will not be determined until the process is complete.
- We suggest that you submit all information by one of the methods listed on the back page WITHIN 2 WEEKS.
- DO NOT make any changes to the FAFSA while in the Verification process.
- If any of the sections of this worksheet are left blank or any signatures are missing, this worksheet will be returned for completion, thereby delaying the processing of your financial aid.
- Thank you for your cooperation and prompt response.

2020 UNTAXED INCOME FAFSA Questions 44/92	Student Enter amount or \$0	Student's Spouse or Student's Parent(s) Enter amount or \$0
Payments to a Tax-Deferred Pension or Retirement 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. Only report codes: D, E, F, G, H and S.	\$ /year	\$ /year
Child Support Received Include January 1- December 31, 2020 child support RECEIVED for any of your or your parents' children. Do not include foster care or adoption payments. Name of the child for who the support was received. _____	\$ /year	\$ /year
Untaxed Portions of IRA Distributions and Pensions From 2020 IRS form 1040 lines (4a+5a) minus lines (4b+5b). Exclude rollovers. If negative, enter a zero	\$ /year	\$ /year
Housing, food or other living allowance paid to clergy and others Including cash payments and cash value of benefits. Do not include contributions made to your place of worship.	\$ /year	\$ /year
BAS (Basic Allowance for Subsistence) received by military personnel in 2020 Provide the yearly amount received.	\$ /year	\$ /year
Veterans non-educational benefits Such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$ /year	\$ /year
Other untaxed income not reported elsewhere (Such as workers' compensation, disability benefits, untaxed foreign income, etc. Also include the untaxed portions of health savings accounts form IRS form, 1040 Schedule 1 – line 12. Do not include extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-basing military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (ex. cafeteria plans) foreign income exclusion or credit for federal tax on special fuels. Please list the benefit: _____	\$ /year	\$ /year

<p align="center">-Continued-</p> <p>2020 UNTAXED INCOME</p> <p>FAFSA Questions 44/92</p>	<p align="center">Student</p> <p align="center">Enter amount or \$0</p>	<p align="center">Student's Spouse or Student's Parent(s)</p> <p align="center">Enter amount or \$0</p>
<p>Money received or paid on the student's behalf (e.g. bills)</p> <p>Include money you received from a parent or other person whose financial information is not reported on this form and that is not part of a legal child support agreement.</p>	<p align="center">\$ /year</p>	<p align="center">\$ /year</p>

I certify the information on this form is true and complete to the best of my knowledge. I understand that purposely giving false or misleading information may result in fines, penalties, and/or reduction or immediate repayment of aid. I understand that the information provided on this form may affect my/my student's financial aid eligibility/award.

Student Signature _____ **Date** _____

Note: Unsigned documents will be returned. This form must be signed with a physical signature. Typed names or electronic signatures are not acceptable.

Parent Signature (if student is dependent) _____ **Date** _____

Note: Unsigned documents will be returned. This form must be signed with a physical signature. Typed names or electronic signatures are not acceptable.

Forms can be submitted in ONE of the following ways:

Submit online via our secure FILEDROP by visiting: <https://willistonstate.edu/admissions/Student-Financial-Aid/Financial-Aid-Forms/>.

Forms can be mailed to or dropped off at the following address: Mailing address: Williston State College ▪ Financial Aid Office
▪ 1410 University Ave. ▪ Williston, ND 58801

For additional questions, email wsc.financialaid@willistonstate.edu or call (701) 774-4248