Office of Financial Aid 8800 O Street Lincoln, NE 68520 Ph.: 402-437-2610 Fax: 402-437-2402 financialaid@southeast.edu

## 2023-2024 FAFSA Verification

## Independent Student (and Spouse) - Untaxed Income

We have received your 2023-2024 Free Application for Federal Student Aid (FAFSA). Your FAFSA was selected for review in a 50xir Nivist production for the first production of the first production of

s possible. Be sorms must be sub	the instructions on this form and return it to The Office of Financia sure to include your name and SCC ID on all forms you submit omitted to our office using one of the following methods: in person, faxed, ng our secure drop box at <a href="https://uploads.southeast.edu/financialaid">https://uploads.southeast.edu/financialaid</a> . <a href="https://uploads.southeast.edu/financialaid">We</a>	to our office. Due to data security guideling mailed through U.S. Postal Service, or
determine how y	y minimal amounts of income, taxable and/or untaxed, reported on your FAF you/your family were financially supported in 2021. Please report below any somarried, your spouse) from each source during the tax year.	
would not b	yments (direct or withheld from earnings) to tax-deferred pension and retirem be included on your W-2s.	ent savings plans (e.g., 401(k) or 403(b) plans) th
	ual amount of any child support received in 2021 for the children in your househ payments, adoption payments, or any amount that was court-ordered but not ac Name of Parent Who Received Name of Ch food and other liv	
	the Support Include cash payments and	

List any money received or paid on the student's behalf (e.g., payment of student's bills) and not reported elsewhere on this form. Enter the total amount of cash support the student received in 2021. Include support from a parent whose information was not reported on the student's 2023-2024 FAFSA, but do not include support from a parent whose information was reported. For example, if someone is paying rent, utility bills, etc., for the student or gives cash, gift cards, etc., include the amount of that person's contributions
. Amounts paid on the student's behalf also include any distributions to the student from a 529 plan owned by someone other than the student or the student's parents, such as grandparents, aunts, and uncles of the student.
Total Amount of Money received or paid on the student/spouse behalf. \$
List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts finom e a s a l s > s 0