FORM SUTINC - IDAHO STATE UNIVERSUNTAXED INCOME REQUEST STUDENT	SITY 2	24-25	SUTINC-25	
The federal government requires colleges to check the provided on your Free Application for Federal Student called verification. You must complete the verification prinancial Aid can establish your eligibility for assistance information requested on this form or you will not be coaid. Please return this completed form to:	Aid ( <u>FAFSA</u> ). This process process before the Office on e. You must return the	s is of		
Office of Financial Aid, Idaho State University, Mus 921 S 8 <sup>th</sup> Ave, Stop 8077, Pocatello, ID 83209-8077 Phone: (208)282-2756 Fax: (208)282-4755 Scan and Upload: <u>isu.edu/financialaid/upload</u>	eum Building, Third Floo Email: <u>financialaid@i</u>			
*Student Name:		First		MI
(Use blue or black ink) Last		First		M.I.
*ISU ID: *Last 4 Digits of Social Security #:				
(Find on MyISU)				*Required
INSTRUCTIONS: Provide amounts for each item below from both you and, if married, your spouse. Do not leave any questions blank; enter a zero (0) if a question does not apply to you.				AMOUNT
IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans.				\$
Total 2022 Sources of Untaxed Income:				\$
<b>CERTIFICATION:</b> The person signing below certifies that all of the information reported is complete and correct.				
Student Signature:		Date:	prison, or bo	th.