



**STUDENT
 SEPARATED/DIVORCED INCOME VERIFICATION**

Student Name: _____ MSU ID: _____

Address: _____

E-Mail: _____ Phone: _____

Your application for federal financial aid indicates that you are divorced or separated as of the date your FAFSA was filed but filed a joint tax return. Federal regulations require that we have a signed statement from you indicating how the reported income was divided between you and your spouse.

Based on your tax return and other documents, please divide your income (between you and your spouse) as shown below, and sign on the reverse side. If you have any questions regarding this form, please contact this office.

	<u>Total on</u> <u>Tax Return</u>	<u>Student</u>	<u>Spouse</u>
<u>Income</u>			
Wages, salaries, tips, etc.:	\$ _____	\$ _____	\$ _____
Tax-exempt Interest :	\$ _____	\$ _____	\$ _____
Dividends:	\$ _____	\$ _____	\$ _____
Refunds of state and local taxes:	\$ _____	\$ _____	\$ _____
Alimony received:	\$ _____	\$ _____	\$ _____
Business income or loss:	\$ _____	\$ _____	\$ _____
Capital gain or loss:	\$ _____	\$ _____	\$ _____
Other gains or losses:	\$ _____	\$ _____	\$ _____
IRA distribution:	\$ _____	\$ _____	\$ _____
Pensions and Annuities:	\$ _____	\$ _____	\$ _____
Rents, Royalties, partnerships, estates, trusts, etc.:	\$ _____	\$ _____	\$ _____
Farm income or loss:	\$ _____	\$ _____	\$ _____
Unemployment compensation:	\$ _____	\$ _____	\$ _____
Social security benefits:	\$ _____	\$ _____	\$ _____
Other income:	\$ _____	\$ _____	\$ _____
<u>TOTAL INCOME:</u>	\$ _____	\$ _____	\$ _____

(Must match total on tax returns)

Total on
Tax Return

Student

Spouse

Adjustments to Income

Educator expenses:	\$ _____	\$ _____	\$ _____
Certain Business Expenses: (Line 24 on 1040)	\$ _____	\$ _____	\$ _____
Health savings account deduction:	\$ _____	\$ _____	\$ _____
Moving expenses:	\$ _____	\$ _____	\$ _____
Self-employment tax:	\$ _____	\$ _____	\$ _____
Self-employed SEP, SIMPLE, etc.	\$ _____	\$ _____	\$ _____
Self-employed health insurance:	\$ _____	\$ _____	\$ _____
Penalty on early withdrawal of savings:	\$ _____	\$ _____	\$ _____
Alimony paid:	\$ _____	\$ _____	\$ _____
IRA Deduction:	\$ _____	\$ _____	\$ _____
Student loan interest deduction:	\$ _____	\$ _____	\$ _____
Tuition and Fees Deduction:	\$ _____	\$ _____	\$ _____
Other Adjustments to income:	\$ _____	\$ _____	\$ _____
<u>TOTAL ADJUSTMENTS:</u>	\$ _____	\$ _____	\$ _____

ADJUSTED GROSS INCOME:

Total income - total adjustments=AGI
(Must match with AGI on tax returns)

\$ _____ \$ _____ \$ _____

TAX PAID:

Must be the same percentage as
each person's adjusted gross income.

\$ _____ \$ _____ \$ _____

Education Credits: \$ _____ \$ _____ \$ _____

I certify that the above information is correct:

Signature of Applicant

Date

Please attach a copy of your divorce, separation, or interlocutory agreement. Failure to do so may delay further processing of your aid application.