

Last Name

STUDENT:_

Submit Documents Via
Secure Electronic Submission:

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2024 – 2025 UNTAXED INCOME VERIFICATION FORM

First Name

FIDN#: A_

ditional information is requested, ormation stated above. The stude	I (we) agree to provide the institution with any sunt and at least one parent (for dependent students tudent signature is needed. We do not accept elect Student's Signature) must provide a signa	
ditional information is requested, ormation stated above. The stude	nt and at least one parent (for dependent students) must provide a signa	
	ed above is true and accurate to the best of my (or nation can jeopardize financial aid eligibility and s	ubject me (us) to fede	ral penalties. I
F) Total Untaxed Income for 2022 (Add A through E)		\$	\$
E) Foreign Earned Income Exclusion from IRS Form 1040 – line 8d		\$	\$
D) Untaxed portions of pensions & annuities from IRS Form 1040—line 5a minus 5b. Exclude rollovers. If negative, enter a zero here.		If negative, \$	<u> </u>
C) Untaxed portions of IRA distributions from IRS Form 1040—line 4a minus 4b. Exclude rollovers. If negative, ente a zero here.		gative, enter \$	\$
B) Tax exempt interest income from IRS Form 1040—line 2a		\$	\$
Form 1040-Schedule 1 — line 16 + line	E-employed SEP, SIMPLE, Keogh and other qualified plans from a 20	1 IRS \$	\$
A) IRA deductions and payments to self		BLANK. Student	Parent