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2026-2027 Tax Exempt Interest Income Form

STUDENT: _____ FIDN#: A _____
Last Name First Name

Please report any tax-exempt interest income received for the student and parent(s) in 2024. This value can be taken from IRS Form 1040 - line 2a.

Please enter “0” if the answer is Zero. Do not leave either blank.

Total amount of parent tax-exempt interest income received in 2024: \$ _____

Total amount of student tax-exempt interest income received in 2024: \$ _____

I (we) certify the information reported above is true and accurate to the best of my (our) knowledge. I (we) understand that providing misleading or false information can jeopardize financial aid eligibility and subject me (us) to federal penalties. If additional information is requested, I (we) agree to provide the institution with any supporting documentation to verify the information stated above. The student and at least one parent (for dependent students) must provide a signature. If you (the student) are independent, only the student signature is needed. We do not accept electronic signatures.

Student's Name (Print)

Student's Signature

Date

Parent's Name (Print)

Parent's Signature

Date