



2023-2024

## UNTAXED INCOME CONFIRMATION

Dear Student,

Your FAFSA information contains some items that need to be confirmed. Please complete each item on this worksheet. If the answer is "0", place a "0". Otherwise, enter the correct amount for each item.

Dependent Students must fill out both the student and parent sections and both must sign. Please return this completed, signed worksheet to our office so that we may continue the review of your financial aid application.

\_\_\_\_\_  
Student's Name (Please Print)

\_\_\_\_\_  
Student's MU ID# or SSN

		Student	Parent
1.	Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S. <b>Don't include</b> amounts reported in code DD (employer contributions toward employee health benefits).	\$ _____	\$ _____
2.	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040 Schedule 1 - total of lines 16 + 20.	\$ _____	\$ _____
3.	Child support received for any of your children. <b>Don't include</b> foster care or adoption payments.	\$ _____	\$ _____
4.	Tax exempt interest income from IRS Form 1040 - line 2a.	\$ _____	\$ _____
5.	Untaxed portions of IRA distributions and pensions from IRS Form 1040 - (lines 4a + 5a) minus (lines 4b + 5b). <b>Exclude rollovers.</b> If negative, enter a zero here.	\$ _____	\$ _____

6.	Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). <b>Don't include</b> the value of on-base military housing or the value of a basic military allowance for housing.	\$ _____	\$ _____
7.	Veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$ _____	\$ _____
8.	Other untaxed income not reported above, such as workers'compensation, disability benefits, and untaxed foreign income not earned from work. Also include the untaxed portions of health savings accounts from IRS Form 1040 Schedule 1 - line 13. <b>Don't include</b> extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$ _____	\$ _____
9.	Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent or other person whose financial information is not reported on this form and that is not part of a legal child support agreement.	\$ _____	\$ _____

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**Submit this worksheet to the Office of Financial Aid.**

**Marymount University | Office of Financial Aid | 2807 N. Glebe Rd. Arlington, VA 22207**