



2021-2022 Untaxed Income Verification Form
OFFICE OF FINANCIAL AID

Student Name: _____

Concordia ID: H00 _____

As part of the required verification process, the Financial Aid Office must reconfirm the dollar amounts, listed as untaxed income for the year, on your Free Application for Federal Student Aid (FAFSA). **(Enter a \$0 if an item does not apply.)**

2019 Additional Financial Aid Information

| | Student/Spouse (Combined amounts) | Parent(s) |
|---|--------------------------------------|-----------|
| Educational credits (Hope and Lifetime Learning Tax Credits) from 2019 IRS Form 1040 Schedule 3 Line 3. | \$ _____ | \$ _____ |
| Taxable earnings from Federal Work-Study or other need-based work programs | \$ _____ | \$ _____ |
| College grant, scholarship, and fellowship aid, including AmeriCorps awards that were reported to the IRS in your (or your parents') adjusted gross income (notated as "SCH" next to wages) | \$ _____ | \$ _____ |
| Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. | \$ _____ | \$ _____ |
| Earnings from work under a cooperative education program offered by a college. | \$ _____ | \$ _____ |

2019 Untaxed Income

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|---|----------|----------|
| Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S. (Do not include amounts reported in Code DD.) | \$ _____ | \$ _____ |
| IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from 2019 IRS Form 1040: Schedule 1 Line 15 + Line 19. | \$ _____ | \$ _____ |
| Child support received for any of your children. Do not include foster care or adoption payments. Received from: _____ Name(s) of child/ren _____ | \$ _____ | \$ _____ |
| Tax exempt interest income from 2019 IRS Form 1040-Line 2a | \$ _____ | \$ _____ |
| Untaxed portions of IRA distributions and pensions from 2019 IRS Form 1040-lines 4a minus 4b. Exclude rollovers. If negative, enter a zero here. | \$ _____ | \$ _____ |
| Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and/or the cash value of benefits). Do not include military housing. | \$ _____ | \$ _____ |
| Veterans non-education benefits, such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances | \$ _____ | \$ _____ |
| Other untaxed income and benefits not reported elsewhere such as worker's compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts, Railroad Retirement Benefits, etc. | \$ _____ | \$ _____ |
| Money received , or paid on the student's behalf (e.g. bills), not reported elsewhere on this form. | \$ _____ | \$ N/A |

 Student Signature Date

 Parent/Spouse Signature Date

Return To: Concordia University Chicago, Office of Financial Aid, 7400 Augusta St., River Forest, IL 60305
Office: (708) 209-3113 | Fax: (708) 488-4102 | Email: Financial.Aid@CUChicago.edu