BOSTON COLLEGE

2024–2025 [illegible] RE[illegible] F RM [illegible] F[illegible] -F[illegible]ER[illegible] X[illegible]

Complete this form if you have not and are not required to ýle a 2022 federal, Puerto Rican, Canadian or any other foreign tax return.

This form may not be used by individuals who work in countries or for tax exempt organizations (e.g., embassies, United Nations, World Bank, DMF, etc.) These individuals must submit signed, translated copies of their foreign tax return or a letter from their employer(s) stating the year's salary and benefit information along with their 2022 year-end pay stub.

Please return this form to www.bc.edu/finaidupload. Detailed instructions, including file limitations, are available at www.bc.edu/applyforaid. Please note that it takes 48–72 hours for your documents to be added to your financial aid file.

Studentôs Name _____ Eagle ID. Number _____

Personal Information

Non-Custodial Parentôs Name _____

Non-Custodial Parentôs Social Security Number _____

I _____ have not and are not required to fle a 2022 federal,
(name)

Puerto Rican, Canadian or any other foreign tax return. List the total amounts of all sour Amount : $ _____ Source : _____

Unemployment Compensation	**Amount : $ _____**	**Source : _____N/A_____**
Interest/Dividends	**Amount : $ _____**	**Source : _____N/A_____**
Veteran's Benefts	**Amount : $ _____**	**Source : _____N/A_____**
Social Security Benefts (total for all family members)	**Amount : $ _____**	**Source : _____N/A_____**
Alimony	**Amount : $ _____**	**Source : _____N/A_____**
Welfare (including AFDC and TANF)	**Amount : $ _____**	**Source : _____**
Other Source	**Amount : $ _____**	**Source : _____**
Total taxable/non-taxable income for 2022	**$ _____**	

Signature

I hereby swear or affirm that the information reported on this form is true, complete, and accurate to the best of my knowledge. I understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of ýnancial aid.

Signature _____ Date _____