

2026-2027 Student/Spouse Non-Filer Statement

_____()_____
Last Name First M.I. Phone No. W00 Student I.D.

The instructions and certifications below apply to the student and spouse (if the student is married). Complete this form if the student and spouse will not file and are not required to file a 2024 income tax return with the IRS.

By completing this document, I certify that I have not filed and am not required to file a 2024 income tax return, and I have listed all income earned from work, other income, and resources for the 2024 tax year.

Check any box that applies below:

- ☐ My spouse and/or I were not employed and had no income earned from work in 2024.
- ☐ My spouse and/or I were employed in 2024 and have listed below the names of all employers, the amount earned from each employer in 2024, and whether an IRS W-2 form, or an equivalent document is provided. *[Provide copies of all 2024 IRS W-2 forms issued to you and your spouse. List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, provide a separate page with your name and ID number at the top.]*

Who is Required to File a 2024 Federal Tax Return (IRS Pub 501)	AND at the end of 2024 you were...	THEN file a return if your gross income was at least...
IF your filing status is...	single	under 65
		65 or older
head of household	under 65	\$14,600
	65 or older	\$16,550
married filing jointly***	under 65	\$21,900
	65 or older	\$23,850
	65 or older (both spouses)	\$29,200
married filing separately	under 65 (one spouse)	\$30,750
	65 or older (both spouses)	\$32,300
qualifying surviving spouse	any age	\$5
	under 65	\$29,200
	65 or older	\$30,750

Student Employer(s)	W2 Attached?	Annual Amt. Earned in 2024	Student's Spouse Employer(s)	W2 Attached?	Annual Amt. Earned in 2024
	<input type="checkbox"/>			<input type="checkbox"/>	
	<input type="checkbox"/>			<input type="checkbox"/>	
	<input type="checkbox"/>			<input type="checkbox"/>	
Total Amount Received from Work:		\$	Total Amount Received from Work:		\$

- ☐ My spouse and/or I had other income and resources that supported us for the 2024 tax year. *[List each source of income in the table below. If more space is needed, provide a separate page with your name and ID number at the top.]*

<i>Student Other Income Source(s)</i>	<i>Annual Amt. Earned in 2024</i>	<i>Spouse Other Income Source(s)</i>	<i>Annual Amt. Earned in 2024</i>
<input type="checkbox"/> Family Support		<input type="checkbox"/> Family Support	
<input type="checkbox"/> Government benefits (type) <input type="checkbox"/> SNAP <input type="checkbox"/> SSI <input type="checkbox"/> WIC <input type="checkbox"/> TANF <input type="checkbox"/> Section 8		<input type="checkbox"/> Government benefits (type) <input type="checkbox"/> SNAP <input type="checkbox"/> SSI <input type="checkbox"/> WIC <input type="checkbox"/> TANF <input type="checkbox"/> Section 8	
<input type="checkbox"/> Child Support received		<input type="checkbox"/> Child Support received	
<input type="checkbox"/> Alimony Received		<input type="checkbox"/> Alimony Received	
<input type="checkbox"/> Other (explain)		<input type="checkbox"/> Other (explain)	
<i>Total Amount Received:</i>	<i>\$</i>	<i>Total Amount Received:</i>	<i>\$</i>

By signing below, you certify that all of the information provided on this certification form, to qualify for Federal Student Aid, is legitimate and accurate. **WARNING:** If you purposely give false or misleading information, you may be fined, imprisoned or both.

STUDENT'S SIGNATURE: _____ DATE: _____ SPOUSE'S SIGNATURE: _____ DATE: _____