

**Morgan State University
Office of Financial Aid
2018-2019**

Independent Student/Spouse Non-Tax Filer's Statement

Student's Printed Name _____ **Student ID#** _____

Spouse's Printed Name _____

I am the: ☐ Student ☐ Spouse

The instructions and certifications below apply to the independent student and/or spouse included in the household. Complete this section if the independent student and/or spouse were unable to obtain the required documentation of verification of nonfiling from the IRS or other tax authorities and **will not file** and **are not required** to file 2016 income tax return with the IRS. Tax returns include 2016 IRS Form 1040, 1040A, 1040EZ, and a tax return from Puerto Rico or a foreign income tax return.

Please initial next to one of the below statements that applies to you.

_____	I will not file and I am not required to file a tax return for the 2016 tax year. I did not work and had no income earnings for 2016.
_____	I will not file and I am not required to file a tax return for 2016 tax year. I have income earnings for 2016, but I am not required to file a 2016 tax return. I have attached all W-2's related to those earnings.

List below all of the sources and amounts of money received from January 1, 2016 through December 31, 2016. Include untaxed income (e.g., AFDC, SSI, military living allowance) and earnings not reported on a federal income tax return. Please include supporting documentation for all income sources listed below. **You must attach copies of any W-2 form(s) and/or 1099 form(s) received in 2016 if applicable.**

2016 Income Information 01/01/2016 thru 12/31/2016	
Source of Income	Amount
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

Certification

By signing this form, I certify that I attempted to obtain the verification of nonfiling from the IRS or other tax authorities and was unable to obtain the required documentation. I did not and am not required to file a 2016 U.S. federal tax return. In addition, I certify that all of the information reported on this form is complete and correct.

Student's Signature: _____ *Date:* _____

Spouse's Signature: _____ *Date:* _____
(If applicable)

Return form and documents to: Morgan State University
Financial Aid Office
1700 E. Cold Spring Lane
Baltimore, Maryland 21251
FAX: 443-885-8359/8272