



2020–2021
Non-Tax Filer Statement – Parent / Dependent Student

Student Name: _____ **Student ID:** _____

Complete this form if one or both parents will not file and **are not required** to file a 2018 IRS Income Tax Return

Check the box that applies to the parent(s) whose information was reported on the FAFSA:

- Neither parent was employed and neither had income earned from work in 2018
- The following parent was not employed and had no income earned from work in 2018:
 Name of parent: _____
- One or both parents were employed in 2018 and have listed below the names of all employers, the amount earned from each employer in 2018 and whether an IRS W-2 form is attached. Attach copies of all 2018 W-2 forms issued by employers. **List all employers even if the employer did not issue an IRS W-2 form. Do not leave any sections blank.**

Parent Name: _____

Source or Employer If none, indicate N/A	2018 Amount Earned If none, indicate \$0	W-2 Provided? If not, please explain.
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____

**If more space is needed, attach a separate page with your name and student ID at the top.*

Parent Name: _____

Source or Employer If none, indicate N/A	2018 Amount Earned If none, indicate \$0	W-2 Provided? If not, please explain.
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____
	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No _____

Certification: ALL PARENTS MUST COMPLETE THE CERTIFICATION BELOW

I, the parent, have attempted to obtain Verification of Non-filing proof from the IRS or other tax authorities on _____ (Date) and have been unable to obtain the required documentation. By signing this worksheet, I certify that all the information reported on it is complete and correct. I understand that if I purposely give false or misleading information on this worksheet, I may be fined, sentenced to jail or both.

 Parent's Signature (required)

 Date

 Student's Signature

 Date