



Parent Non-Filer Statement 2017-2018

Name: _____
Student's Name (Last, First, M.I.)

ID: _____
Student Identification Number (SID)

This form is to be completed by the parent(s) whose information was reported on the *Free Application for Federal Student Aid* (FAFSA). Complete this form if you will not file, and are not required to file, a 2015 federal income tax return (i.e. Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico, or a foreign income tax return). To determine if you are required to file a 2015 federal income tax return, view the tables at www.irs.gov

1. What was your marital status as of the date your student's FAFSA was originally completed? (check one)

- Single (separated, divorced, widowed, or never married) Complete Step 2 & skip 3
- Married (married, remarried) Complete Step 2 & 3

2. Did you file or are you required to file a 2015 federal tax return?

- Yes (Submit a copy of your federal tax return transcript to our office and do not include your info below.)
- No (Include yourself in Step 4.)

3. Did your spouse (if married) file or is he/she required to file a 2015 federal tax return?

- Yes (Submit a copy of your spouse's federal tax return transcript to our office and do not include his/her info below.)
- No. (Continue to Step 4 and include yoursouse.)

4. Indicate your employment type(s) and provide annual work income received in 2015 for each type.

Include all earnings from work, even if a W-2 was not received. Enter "0" if no income; do not leave any lines blank.

Your Name _____	Birthdate (Month/Year) _____
<input type="checkbox"/> Work Income from Company/Organization	\$ _____
<input type="checkbox"/> Work Income from Self-Employment	\$ _____
Spouse's Name _____	Birthdate (Month/Year) _____
<input type="checkbox"/> Spouse's Work Income from Company/Organization	\$ _____
<input type="checkbox"/> Spouse's Work Income from Self-Employment	\$ _____

5. List untaxed income received in 2015 for you (and spouse if married).

Enter "0" if no income; do not leave any lines blank.

Tax-deferred Pension/Savings: <i>Including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S</i>	\$ _____
Military/Clergy Allowance: e.g., housing, food, other living allowances, etc. <i>Do not include on-base military housing or a military housing allowance, or combat pay.</i>	\$ _____
Veterans Non-Education Benefits: e.g., disability, death pension, etc.	\$ _____
Other Untaxed Income: e.g., workers' compensation, disability, etc. <i>Do not include student aid (grants or loans), welfare payments, untaxed Social Security benefits, Supplemental Security Income, WIA educational benefits or benefits from flexible spending arrangements.</i>	\$ _____

By signing this form, I certify that all the information provided is complete and accurate.

Parent signature

Date

Please submit your form by mail, fax or in person to the Office of Financial Aid
2404 North Grand Ave. • Tyler, Texas 75702 • fax 903-593-9607 • www.texascollege.edu