Financial Aid Office
2026-2027 Nontax Filer Statement
Form Independent Student

The financial aid office must compare the FAFSA data submitted with the information on this worksheet and other required documents. Students and their spouse (if married) should complete this form if they will not file and are not required to file a Federal Income Tax Return with the IRS.

Student name	Student ID #
Student cell phone number	Student SSN

Please provide a Verification of Non-filing Letter from the IRS dated after October 1, 2025 for you and your spouse, if married.

Student Tax Section

❏ I was not employed and had no income earned from work in 2024.

❏ I was employed in 2024 and have listed below the names of all employers and the amount earned from each employer.

If you attempted to obtain an IRS verification of non-filing letter and were unable to retrieve the documentation, please initial here_____.

Spouse Tax Section (Only complete this section if married)

❏ My spouse was not employed and had no income earned from work in 2024.

❏ My spouse was employed in 2024 and has listed below the names of all employers and the amount earned from each employer.

If your spouse attempted to obtain an IRS verification of non-filing letter and was unable to retrieve the documentation, please have your spouse initial here_____.

Please complete the table below by listing all sources of income for 2024 and submit all W2s or 1099s for each source of employment.

Employer's Name or Source of Earned Income from Work	Student	Spouse	*Gross Earnings in 2024 (See Box 1 of W2)*	W-2 or 1099 Issued?
(Example) ABC's Auto Body Shop	X		$4,500 (Example)	❏Yes ❏No
			$	❏Yes ❏No
			$	❏Yes ❏No
			$	❏Yes ❏No
	Total Wages for 2024		$	

*****Attach W-2s and 1099s and/or Letter of Non-Filing**

By signing this Verification Statement, I (we) certify that all information reported is complete and accurate. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

X_____ _____

Student signature **Date**

Please complete and return to: ASU - Beebe Financial Aid Office

Mail: **1000 W. Iowa Street Beebe, AR 72012** Email: **finaid@asub.edu**