

**UNIVERSITY OF NEW MEXICO  
STUDENT FINANCIAL AID OFFICE  
STUDENT DECLARATION THAT A 2015 FEDERAL INCOME TAX FORM WILL NOT BE FILED**

<b>Student's Printed Name</b>	<b>UNM ID Number</b>	<b>Telephone Number</b>	<b>E-mail Address</b>

I (we) will not file, and am (are) not required to file a federal income tax return (includes the 2015 IRS Form 1040, 1040A, 1040EZ, a foreign tax return, or a tax return with Puerto Rico, another U.S. territory (e.g., Guam, American Samoa, the U.S. Virgin Islands, Swain's Island or the Northern Marianas Islands) or one of the Freely Associated States (i.e., the Republic of Palau, the Republic of the Marshall Islands or the Federated States of Micronesia.)

**NOTE: Federal regulations require us to verify your nontax filing status. You must confirm your nontax filing status by submitting a Verification of Non-Filing letter from the IRS to our office. Please visit <https://www.irs.gov/individuals/tax-return-transcript-types-and-ways-to-order-them> for instructions on how to order this letter.**

SOURCE	AMOUNT STUDENT	AMOUNT SPOUSE	TOTAL
Annual earnings from work			
Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), 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. <b>DO NOT INCLUDE</b> amounts reported in code DD (employer contributions toward employee health benefits).			
Annual child support received for any of your children. <b>DO NOT INCLUDE</b> foster care or adoption payments.			
Annual housing, food and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). <b>DO NOT INCLUDE</b> the value of on-base military housing or the value of a basic military allowance for housing.			
Annual veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.			
Annual other untaxed income not reported elsewhere on Step Two of the FAFSA such as workers' compensation, disability, etc. <b>DO NOT INCLUDE extended foster care benefits</b> , student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.			
Annual money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form.			
<b>TOTAL</b>			

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

By signing this worksheet, I (we) certify that the information reported is complete and correct.

<b>Student's Signature</b>	<b>Date Signed</b>	<b>Spouse's Signature</b>	<b>Date Signed</b>

The University of New Mexico is an Equal Opportunity/Affirmative Action Institution. Pursuant to the Americans with Disabilities Act, if you require this information in alternative format or have special needs, please contact the Office of Student Financial Aid for assistance.

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 STUDENT DECLARATION THAT A 2015 FEDERAL INCOME TAX FORM WILL NOT BE FILED  
 (Part II)

<b>Student's Printed Name</b>	<b>UNM ID Number</b>	<b>Telephone Number</b>	<b>E-mail Address</b>

Please complete the section below to inform us of the annual income that you have received for the 2015 year.

<p><b>Annual Income Earned:</b></p> <p>Other Income Student:       \$ _____</p> <p>Other Income Spouse:       \$ _____</p> <p>Other: (Please List)         \$ _____</p> <p>Total Income/Assistance for 2015: \$ _____</p>	<p><b>Income from Assistance Programs (Check Box)</b></p> <p>Social Security Benefits:   <input type="checkbox"/> Yes       <input type="checkbox"/> No</p> <p>Disability Benefits:       <input type="checkbox"/> Yes       <input type="checkbox"/> No</p> <p>Food Assistance:           <input type="checkbox"/> Yes       <input type="checkbox"/> No</p> <p>TANF/Income Support:      <input type="checkbox"/> Yes       <input type="checkbox"/> No</p>
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**Statement** – Please itemize amounts received below, if you shared expenses with a roommate list only your portion of the income and expenses. If you had no source of income, provide a **DETAILED explanation below of how you maintained living expenses**. If income was earned outside of the U.S. please convert to U.S. dollars. Please ensure that document is complete and signed prior to submitting to the Financial Aid Office. (If additional space is needed, please attach a separate statement)


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