A040

SCRIPPS
THE WOMEN'S COLLEGE

2019–2020 STUDENT NON-FILING STATEMENT

Student's Name _____ Student's ID Number _____
Last First

CBFINAID ID Number _____

- If you filed or will file a 2017 U.S. federal income tax return, please do not submit this form. Submit a copy of your 2017 tax return instead. You may be required to file an income tax return and may not be able to use this form if your 2017 taxable earned income is more than: $10,400 if you are single and not claimed as a dependent on your parents' tax return; or if your taxable earned income is more than $6,350 if you are single and claimed by your parent.
- If you have unearned income (i.e., interest and dividends) was more than $1,050, you must file a 2017 tax return.
  Indicate total yearly income amounts earned or received by student from January 1 to December 31, 2017. Do not report your parents' income on this form.

Sources of income in 2017 — **Total Amount in 2017**

Please complete all entries, entering "0" or n/a where appropriate. Reportfall figures as whole numbers rounded to the nearest dollar.

1. Gross income earned by student in 2017 — 1. $ _____
   (including wages, work-study, undocumented income, and business income if self-employed)
   a. From line 1, enter amount earned through Federal Work-Study in 2017 — a. $ _____
   b. Will you be claimed as dependent on your Parents' 2017 federal tax return? ☐ Yes ☐ No
   c. Are you married? ☐ Yes ☐ No
   d. Do you have a dependent child? ☐ Yes ☐ No
2. Social Security benefits you received in your own name — 2. $ _____
   a.Social Security benefits your parent received for you $ _____
3. Interest/dividends — 3. $ _____
4. Fee waiver, Scholarship or award received in 2016 academic year, but not included on your 2016 financial aid award. — 4. $ _____
5. Other Income: _____ — 5. $ _____
6. Money received or paid on your behalf not reported elsewhere on this form. — 6. $ _____
   (Do not include any amouts reported by your custodial parent as child support received.)

   Indicate source and amount:

   ☐ Parent $ _____
   ☐ Noncustodial Parent $ _____
   ☐ Sibling(s) $ _____
   ☐ Other Relatives $ _____
   ☐ Other $ _____
7. **TOTAL INCOME, SUPPORT AND BENEFITS IN 2017** (Add lines 1 through 6) — 7. $ _____

Certification:

I certify that federal law does not require me/us to file a 2017 U.S. federal income tax return and that one will not be filed. If requested, I will provide official confirmation of this from the Internal Revenue Service (IRS). I affirm that all the information on this form is true and correct to the best of my knowledge. I understand that false statements or misrepresentation will be cause for denial, reduction, withdrawal or repayment of financial aid.

Student's Signature _____ Date _____

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