

**2016-2017 STUDENT AFFIDAVIT OF NON-FILING OF 2015 TAX RETURN**

**Student's Last and First Name:** \_\_\_\_\_ **Student's 9-digit UCR ID#:** \_\_\_\_\_

**ONLY COMPLETE THIS FORM IF YOU/YOUR SPOUSE DID NOT AND ARE NOT REQUIRED TO FILE A 2015 INCOME TAX RETURN.**  
 (Refer to page 7 of 2015 1040 instruction booklet on filing requirements.) Complete the income information below.  
 Round dollar amounts to the nearest dollar (no cents). Omit hyphens, dollar signs, and commas.

**2015 ANNUAL INCOME RECEIVED FROM JANUARY 1, 2015 TO DECEMBER 31, 2015**

- 1. Student's Income from Work: \$ \_\_\_\_\_
  - 2. Spouse's Income from Work: \$ \_\_\_\_\_  
 You and your spouses combined income from work from the following sources:  
 Federal Work-Study \$ \_\_\_\_\_  
 Teaching or Research Assistantship \$ \_\_\_\_\_  
 Residence Hall Advisor Stipend \$ \_\_\_\_\_
  - 3. Unemployment Benefits \$ \_\_\_\_\_
  - 4. Child Support Received \$ \_\_\_\_\_
  - 5. Disability Benefits \$ \_\_\_\_\_
  - 6. Workers' Compensation \$ \_\_\_\_\_
  - 7. Retirement Benefits \$ \_\_\_\_\_
  - 8. Housing Assistance (specify type) \$ \_\_\_\_\_  
*\*see below*
  - 9. Veterans Benefits (noneducation) \$ \_\_\_\_\_
  - 10. Vocational Rehabilitation \$ \_\_\_\_\_
  - 11. Money Received, or Paid on your Behalf \$ \_\_\_\_\_
  - 12. Other (specify type) \$ \_\_\_\_\_
- TOTAL:** \$ \_\_\_\_\_

13. Indicate whether you received Financial Aid in 2015 (grants, scholarships and/or loans) Yes  "No   
*\* Include food and other living allowances paid to members of the military, clergy, etc. (including the cash value of benefits).*

**Describe the circumstances which qualifies your non-filing status.**

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If I/we subsequently file a 2015 tax return, I/we understand that my/our tax data **MUST** be provided through the Federal IRS Data Retrieval process at [www.fafsa.gov](http://www.fafsa.gov) or by requesting a 2015 Federal Tax Return Transcript from the IRS website at <https://sa.www4.irs.gov/irfof-tra/start.do> or by calling the IRS at 800.908.9946.

**\*Certifications and Signatures:** Signing below certifies that all the information reported is complete and correct.

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The student and one parent whose information was reported on the FAFSA must date and sign.

**\*WARNING:** If you purposely give false or misleading information, you may be fined, sent to prison, or both.

*After you have filled in the information, print, sign, and submit this form:*

by email at [finaid@ucr.edu](mailto:finaid@ucr.edu), or by fax (951) 827-5619, or in person at  
**UC Riverside - Financial Aid Office - 900 University Avenue - Riverside, CA 92521**