



OFFICE OF FINANCIAL AID AND VETERANS AFFAIRS

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 Federal School Code – 008087 · <https://www.montgomery.edu/financial-aid>

2021-22 Non-Filer/Low Income Verification Form
 2019 TAX YEAR information being provided

Student Name _____ MCC ID/SSN# _____
 Non-Filers Name (if different than Student) _____

Complete this form, only if you, the student, (and/or your spouse) or Parent(s), if dependent, did not file and were not required to file a Federal Tax Return or submitted a Tax Return Transcript showing unusually low income (which is considered \$5,000 or less). Please send a copy of all W-2s and an IRS Wage and Income Transcript from the IRS website (and a Verification of Non Filing (4506-T) if you did not file).

Note: If an Automatic Tax Extension is filed or will be filed you cannot use this form.

MCC Financial Aid Office has completed an initial review of your Free Application for Federal Student Aid (FAFSA). Additional Information is needed to verify the income from last year. According to our records you, (spouse if applicable) and/or parent(s) have not filed, and are not required to file a Federal Income Tax Return or a Tax Return showing unusually low income was submitted. **Are you employed now? If so, attach the most recent W2.**

Below is a chart that we need for you to complete using 2019 information. Please list your average household monthly expenses and how they were paid in the appropriate boxes. **In addition, attach a legible copy of all W-2s or an IRS Wage and Income Transcript** with the student's name and MCC student ID number.

NOTE: If you, your spouse, and/or parent(s) were not required to file a 2019 Federal tax return because of Foreign Income, please submit a copy of the Foreign Tax Return with currency converted to US dollars.

NOTE: If you were not employed or did not receive any untaxed income, but reside with individuals who support you, please indicate a dollar value you would assess to that support.

Type of Household Expense	What it costs per month	Source of Income
1. Housing: <input type="checkbox"/> My own home/apartment <input type="checkbox"/> Other (please specify, i.e. with friends, family)		
2. Household Utilities (average per month): electricity, phone, gas, water, etc.		
3. Food:		
4. Clothing:		
5. Transportation:		
6. Medical Insurance:		
TOTAL:		

