OFFICE OF FINANCIAL AID AND VETERANS AFFAIRS
1011 PAGE ST. • TROY, NC 27371 • (910) 898-9600 • FAX: (910) 576-2176
Federal School Code – 008087 · https://www.montgomery.edu/financial-aid

2026-2027 Non-Filer/Low Income Verification Form

2024 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 showing unusually low income (which is considered $15,000 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 2024 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 2024 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: ☐ My own home/apartment ☐ 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:		

Only complete this section if you were incarcerated last year.

I was incarcerated last year beginning _____ and ending _____.
Month/Year Month/Year

Please provide taxable and non-taxable income for any portion of the year that you were not incarcerated:

Total Taxable income: $_____ Source: _____
Total Non-taxable income $_____ Source: _____

Did you have any bills in your name last year? (e.g. credit cards, cell phones, rent, power bills, car insurance policy)? ☐ **Yes** ☐ **No**

Were any bills in your name paid for you by someone else or an organization? ☐ **Yes** ☐ **No**

If yes, list each bill and the amount paid for the year and who paid the bill. ***Please include any payments received from any crisis assistance organizations.***

_____
_____
_____
_____
_____

Did you or anyone in your household receive any of the following benefits last year?

☐ SNAP (Food Stamps) ☐ Public Housing
☐ Utility Check ☐ TANF (Work First)
☐ Medicaid ☐ WIC

Miscellaneous Income	**Monthly Amount**	**Annual Amount**
Miscellaneous:		
• Social Security Disability	_____	_____
• Other Disability Benefits	_____	_____
• Unemployment Benefits	_____	_____
• Alimony	_____	_____
• Child Support	_____	_____
• Other: _____	_____	_____

By signing this form, I/we certify that I/we are not required to file, have not filed and will not file a Federal IRS Form , a Tax Return for Puerto Rico or for a foreign country or have provided a Tax Return Transcript that shows unusually low income.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

We recommend you make a copy of this worksheet for your records.
Submit this completed worksheet immediately to the MCC Office of Financial Aid and Veterans Affairs

Montgomery Community College provides equal opportunities to all students, employees and applicants for admission and employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex (including pregnancy), national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.