



SPNR22

Spouse Non-filer Resources For Tax Year 2019

Please Use Black or Blue Ink

Student Name:

| | | | | | | | |
|---------------------------------------|--|--|--|--|--|--|--|
| OSU Student ID ("A" plus 8 digits) | | | | | | | |
| A | | | | | | | |

You have indicated that, because your spouse doesn't have a Social Security Number, an Individual Taxpayer Identification Number, or an Employer Identification Number, AND his/her income is below the IRS filing threshold, your spouse is unable to obtain the 2019 **Verification of Non-filing Letter** from the IRS.

Individuals in this situation must submit a statement certifying that they do not have a Social Security Number, an Individual Taxpayer Identification Number, or an Employer Identification Number, and provide a listing of the sources and amounts of earnings, other income and resources that were used to support the person during the 2019 tax year (January 1, 2019 – December 31, 2019).

Your spouse should complete and sign this form. **We can't determine aid eligibility until all requested documents are received and reviewed.**

Part I: Certification of Inability to Obtain IRS 2019 Verification of Non-filing Letter

Certification of Inability to Obtain IRS 2019 Verification of Non-filing Letter:
I certify that I do not have a Social Security Number, an Individual Taxpayer Identification Number, or an Employer Identification Number and, as such, cannot obtain a 2019 Verification of Non-filing Letter from the IRS. I understand that, if my income is equal to or greater than the IRS filing threshold, I will be required to request a Social Security Number, Individual Taxpayer Identification Number, or Employer Identification Number and file an income tax return before the student is eligible to receive Federal Title IV financial aid.

| | |
|--|--------------------------------|
| _____ | _____ |
| Spouse's Signature <i>(electronic signature not acceptable)</i> | Date |
| _____ | _____ |
| Printed Name of Spouse | OSU Student ID, if OSU Student |

Part II: Required Resource Information

Provide information, on the next page, about any resources, benefits, and other amounts received by the student's spouse. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and includes such things as:

- Federal veterans' education benefits (GI Bill benefits),
- Basic military housing allowances or the value of on-base military housing,
- Section 8 housing assistance,
- SNAP (food stamps),
- TANF,
- Social Security benefits,
- Retirement benefits,
- Federal aid received by others in your household,
- Gifts and/or loans received by family members and/or friends,
- Others, etc.

If more space is needed, provide a separate page with the student's name and OSU Banner ID at the top.

This is a two-page form.

Student Name _____

OSU Student ID _____

Do not leave the following section blank.
Either list recipients and types and amounts of support OR check the box and explain how the student's spouse's basic daily needs (i.e., food and shelter) are being met.

| Other Resources, Benefits and Financial Support Received in Calendar Year 2019 (Refer to list of possible resources on previous page) | | |
|--|---------------------------|---|
| Name of Recipient | Type of Financial Support | Annual Amount of Financial Support Received in 2019 |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| Total Amount of Financial Support Received | | \$ |
| <input type="checkbox"/> I did not receive any resources, benefits or other types of financial support in calendar year 2019. If you check this box, please explain below how your household's basic daily needs (i.e. food and shelter) are being met. Explanation: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Certification/Signature:
By signing below you certify that all of the information reported is complete and correct. **If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.**

Spouse's Signature (electronic signature not acceptable)

Date

Printed Name of Spouse

OSU Student ID, if OSU Student

Return to:
Office of Scholarships and Financial Aid
119 Student Union, Stillwater, OK 74078-5061
Fax: (405) 744-6438 (if you fax, please do not mail the form)

Questions?
Email: finaid@okstate.edu
Phone: (405) 744-6604
Web: financialaid.okstate.edu