



**Kean University**  
**Office of Financial Aid**  
**1000 Morris Avenue**  
**Union, NJ 07083**

**2025-2026 Statement of Tax Non-Filing**

Student Name: \_\_\_\_\_

Kean ID #: \_\_\_\_\_

You are receiving this form because you, your parent(s), or your spouse (if married) indicated on the 2025-2026 FAFSA you did not, will not, and are not required to file a 2023 IRS tax return. You are required to complete the information listed below and submit this form through the KeanWISE Financial Aid Self Service.

A. I was not employed and had no income earned from work in 2023. I am (check all that apply):

\_\_\_ the student

\_\_\_ the student's other parent

\_\_\_ the student's parent

\_\_\_ the student's spouse (if married)

B. I was employed in 2023 and have listed below the names of all employers, the amount earned from each employer, and whether an IRS W-2 form is attached. I certify that I am not required to file a 2023 IRS income tax return.

*List every employer (even if they did not issue an IRS W-2 form) and identify yourself by checking the applicable box on the right. If more space is needed, attach a separate page with the student name and Kean ID # at the top.*

Income Earned from Work – Tax Year 2023			Non-Filer: Check Appropriate Box for Each Listed Employer			
Employer's Name	Gross Amount Earned	W-2 Attached? (Yes/No)	Student	Student's Parent	Student's Other Parent	Student's Spouse
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00(example)</i>	<i>Yes(example)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Certification and Signatures**

Each person signing this form certifies that all the information reported above is complete and correct.

Student: \_\_\_\_\_

Date: \_\_\_\_\_

Parent: \_\_\_\_\_

Date: \_\_\_\_\_

Other Parent (if also a non-filer): \_\_\_\_\_

Date: \_\_\_\_\_

Student Spouse (if married): \_\_\_\_\_

Date: \_\_\_\_\_

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