



This form should be used by individuals who are not required to file a 2023 US tax return. Note that this form may not be used if the combined income (including college work-study earnings) for calendar year 2023 was more than \$13,850 (single), \$20,800 (head of household) or \$27,700 (married filing jointly or qualifying widow(er)).

This form may not be used by individuals who work in foreign countries or for tax-exempt organizations, such as embassies, the UN, OAS, WHO, World Bank or IMF. These individuals need to submit signed, translated copies of their foreign tax return (to include conversion to US dollars), or a letter from their employer(s) stating the year's salary and benefit information and attach their 2023 year end pay stub.

GW Student Last Name

First Name

MI

GWid

This certification is for: (check only one box)

[] Student, [] Student's Spouse, or [] Student's Parent(s)

Make additional copies if form is needed for more than one of the above.

No tax return was/will be filed for the following reason(s):

Check applicable boxes and list all sources of income:

[] Taxable income less than the amount required for filing

List source and amount. List all wages (including work-study earnings), tips, salaries, interest, dividend income, alimony, etc.

[] Non-taxable income

List source and amount. List all Social Security benefits, veterans' benefits, unemployment compensation, Aid to Families with Dependent Children (AFDC), Temporary Assistance for Needy Families (TANF), welfare benefits, disability income, child support, pensions, etc.

Table with 2 columns: Source of income, Amount per year. Rows include Wages (Work-study, Non Work-study), Interest Income, Dividend Income, Tips, and Other.

Table with 2 columns: Source of income, Amount per year. Rows include Social Security, AFDC/ADC/TANF, VA Benefits, and Other.

[] NO INCOME

If no income, how were you or your family supported?

I (we) certify that I (we) have not and am (are) not required to file a US tax return for the 2023 year. I (we) confirm that all sources of income are included on this form, and that all information reported on this form and/or used to calculate my or my child's/spouse's award is complete and correct. (Please either provide a wet signature or use an electronic signature application. Documents that have a typed signature will not be accepted)

Signature _____ Print Name _____ Date _____