



### C. Tax Information- *required*

Using the three methods provided below, select which option applies to each person .

*Example:* Student used the FAFSA FTI and FAFSA Privacy Consent method, select option “A.” If the student’s spouse did not file, select option “C” and complete table below.

**Student** (check one):

- A
- B
- C

**Student’s Spouse** (check one):

- A
- B
- C

- A.** FAFSA FTI Approval and FAFSA Privacy Consent was/will be used to provide tax information on the FAFSA. *See enclosed Tax Return Transcript Request Method 1 if you have not yet transferred your taxes. (If you checked this box, sign and return form to FA office).*
- B.** An IRS Tax Return Transcript **OR** a signed and dated copy of the 2024 federal income tax return (Form 1040) with Schedule 1 and Schedule 3 will be submitted. Married parents who file separate tax returns must provide a transcript for each filer. *See enclosed IRS Tax Return Transcript Request Method 2. (If you checked this box, sign and return form to FA office).*
- C.** By checking this box, I (and/or my spouse) certify that we did not file, and I/we were not required to file a 2024 Federal Income Tax Return, and have listed all income earned from work, other income, and resources for the 2024 tax year. **You are required to provide copies of all 2024 W-2 forms for all sources of earned income and submit a copy of the non-filing letter from the IRS** (see enclosed IRS Tax Return Transcript Request Method 3). **If you cannot provide a W-2 form for a source, explain why.** Complete table below, listing all sources of income and amounts of earnings, other income, foreign income earned, and resources that supported the individual(s) for 2024 tax year, *if you had no income in 2024, write the word “NONE” under source of income.*

**If Option “C” was selected, fill in the table below:**

Source of Income/Employer’s Name	Name of person who earned income	2024 Amount Earned	Check if W-2 was included, if not explain
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

### Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

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

X

Student Signature

Date

X

Contributor/Spouse Signature

Date

**Return to ACC Financial Aid Office, 665 Johnson Street, Alpena, MI 49707 or Fax to 989-358-7541.  
For more information, call 989-358-7286.**