

NewSchool of Architecture and Design

2018 Self-Employed Tax Extension Statement - Independent

You and/or your spouse indicated that you were granted a filing extension beyond the automatic six-month extension to file your 2018 Federal Tax Return. Per federal verification regulations you are required to submit the additional information listed below.

Please complete and return this form, along with the applicable supporting documentation, to the Office of Financial Aid as soon as possible so that we may complete the verification process. You can fax the documents to 619-684-8880, submit them in person, or send by mail.

1. A copy of the IRS's approval of an extension beyond the automatic six-month extension for tax year 2018, e.g. IRS Form 2350.
2. Copy of IRS Form W-2 for each source of 2018 employment income received.
3. I certify that I did not file a 2018 income tax return.

Adjusted Gross Income (2018) _____

U.S. Income Tax Paid (2018) _____

Source of 2018 Income _____

Amount of Income _____

Source of 2018 Income _____

Amount of Income _____

5. The Verification of Nonfiling letter (confirmation that the tax return has not yet been filed) from the IRS or other relevant tax authority dated on or after October 1, 2019.

If you and/or your spouse cannot obtain the IRS Verification of Nonfiling letter, you may submit a signed statement that certifies that you attempted to obtain the Verification of Nonfiling letter from the IRS and was unable to obtain the required documentation, and that you did not file a 2018 income tax return.

Please note: If you and/or your spouse do not have a social security number, an individual taxpayer identification number, or an employer identification number, you must also include this information in your Verification of Nonfiling signed statement.

Certification and Signature

Each person signing below certifies that all 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.*

Print Student's Name (Required)	Date	NSAD ID/SSN (Required)	Date
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Student's Signature (Required)	Date
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