

***Everyone providing information on this form must sign on page 5 to receive consideration.**

Student's & (Spouse's) Assets

16. Cash, Savings and Checking accounts \$.00

17. Investments including Uniform Gifts to Minors \$.00 What is it worth today? \$.00 What is owed on it? \$.00

18. Home (Renters write in "0") What is it worth today? \$.00 What is owed on it? \$.00

19. Other Real Estate (Don't include business or farm.) What is it worth today? \$.00 What is owed on it? \$.00

20. Farm What is it worth today? \$.00 What is owed on it? \$.00

21. Family Members- Give information for all family members not yourself. If there are more than seven, first list those who will be in college at least half-time.

Full name of family member, You-applicant	Age	*Use codes from below	2019-2020 School Year		Name of College	Year in school	Total Financial Aid	Parents Contribution
			In College at least one term					
			Full time	Half time				
1.								
2.								
3.								
4.								
5.								
6.								
7.								

* Relationship to applicant: 1= Parent 2=Step Parent 3=Brother/Stepbrother or Sister/Stepsister 4=Husband or wife 5=Son or Daughter 6=Grandparent 7=Other (Explain: _____)

Parents Information

22. How much do the parents named below in 23 and 24 Agree to contribute to the student's education for the 2019-2020 school year? \$.00

23. Check one: Father Stepfather Legal guardian Other (Explain on pg. 5)

a) Name _____ b) Check if: Self- Employed Unemployed:

 Date of last employment ___/___/___ c) Occupation: _____

d) Agreement _____ No. of Years _____ e) Work telephone _____

f) Retirement plans:
 Social Security Only Another Agreement Only Social Security and another Agreement None

24. Check one: Mother Stepmother Legal guardian Other (Explain on pg. 5)
- a) Name _____ b) Check if: Self Employed Unemployed
 Date of last employment: ___/___/___ c) Occupation: _____
- d) Agreement _____ No. of Years _____ e) Work telephone _____
- f) Retirement plans:
 Social Security Only Another Agreement Only Social Security and another Agreement None
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Divorce, Separated, or Remarried Parents (To be answered by the parents who complete this form, if the student's natural or adoptive parents are divorced, separated or remarried.)

- a) Year of separation ___/___/___ Year of divorce ___/___/___
- b) Other parent's name _____ Occupation/Agreement _____
 Home Address _____
- c) According to court order, when will support for the student end? (mm/yy) ___/___
- d) Who last claimed the student as a tax exemption? _____ In which year? ___/___
- e) How much does the other parent agree to contribute to the student's education for 2019-2020? \$_____.00
- f) Is there an Agreement specifying this contribution for the student's education? Yes No
-

Parents 2019 Taxable Income & Expenses

25. Breakdown of 2019 Adjusted Gross Income (AGI) Tax Filer Only

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| a) Wages, Salaries, tips (IRS Form 1040/1040A, Line 7: 1040 EZ, Line 1) | a) \$ _____ .00 |
| b) Interest income (IRS Form 1040/1040A, Line 8a: 1040EZ, Line 2) | b) \$ _____ .00 |
| c) Dividend income (IRS Form 1040/1040A, Line 9) | c) \$ _____ .00 |
| d) Net income (or loss) from business, farm, rents, royalties, partnerships, estates, trusts etc. (IRS Form 1040, Lines 12, 17 and 18). If a loss enter the amount in () parentheses. | d) \$ _____ .00 |
| e) Other taxable income such as alimony received, capital gains (or losses), pensions, annuities, etc. (from IRS Form 1040) | e) \$ _____ .00 |
| f) Adjustments to income (IRS Form 1040, Line 32 or 1040A, Line 18) | f) \$ _____ .00 |

26. 2019 Medical and Dental expenses not covered by insurance (Optional-see instructions) 26. \$ _____ .00

27. Total elementary, junior high school and high school tuition paid for dependent children (excluding applicant)	2019	Expected 2020
	27. (a) \$ _____ .00	27. (c) \$ _____ .00
For how many dependent children? (Do not include applicant)	(b) _____	(d) _____

Parents' 2019 Untaxed Income & Benefits

28. Write in below parents other untaxed 2019 income and benefits. Don't include child support.
- a) Deductible IRA and/or Keogh payments (Form 1040, total of lines 23 & 29 or 1040A line 16) \$ _____ .00
- b) Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings); include untaxed portions of 401(k) and 403(b) plans. \$ _____ .00
- c) Earned income credit (Form 1040 line 61a or 1040EZ, line 9a) \$ _____ .00
- d) Housing, food and other living allowances (excluding rent subsidies for low-income housing) paid to members of the military, clergy, and other. Include cash payments and cash value of benefits. \$ _____ .00
- e) Tax-exempt interest income (Form 1040, 1040A, line 8b) \$ _____ .00

Please give information for any outside scholarships you have been awarded.

Use this space to explain any unusual expenses such as high medical or dental expenses, educational and other debts, childcare, elder care or special circumstances.

**ALL RELEVANT SECTIONS OF THIS FORM MUST BE COMPLETED REGARDLESS OF
DUPLICATION WITH INTERNAL REVENUE SERVICES (IRS) FORMS!**

Certification:

All of the information on this form is true and complete to the best of my knowledge. If asked by authorized official, I agree to give proof of the information that I have given on this form. I realize that this proof may include a copy of my U.S., State, or local income tax returns. I also realize that if I don't give proof when asked, the student may not receive aid. ***Everyone giving information on this form must sign below.**

1. _____ Date 2. _____ Date
Student's Signature Student's Spouse's Signature

3. _____ Date 4. _____ Date
Father's/Stepfather's Signature Mother's/Stepmother's Signature

When you have completed this form, make a copy for your records.

Due by April 30, 2020