

Name of Business or Farm _____

Student's Last Name _____ Student's First Name _____ M. I. _____ Social Security Number _____

Name of parent owner(s) _____ %
Percentage of ownership

Owner(s)' relationship to student – select all that apply: Father Mother Noncustodial Parent Student Other

Instructions for Completing the Business/Farm Supplement

- This form should be completed by the owner for each business or farm.
- Use your 2016 and 2017 IRS tax returns — specifically, **Form 1040, Schedules C, D, and F, Form 1120** (incorporated businesses), **Form 1065** and/or **Schedule K1** (partnerships), as applicable, to complete this form. For any year for which tax forms have not been completed, estimate as accurately as possible. A financial aid administrator at your college may ask you to provide copies of your tax returns, including your corporate and partnership tax return(s).
- If the Business/Farm Supplement has been requested by your institution, don't submit balance sheets, profit and loss statements, cash flow statements, or tax returns instead, unless specifically directed by your institution.
- Don't include your home value on the Business/Farm Supplement.
- If a financial question does not apply to you, write 0. Do not leave questions blank unless the instructions tell you to do so.
- **IMPORTANT:** If a business or farm is a major source of family support but no salaries are reported and business net profit is under \$10,000, explain on an additional sheet how basic family expenses are met.

Business/Farm Information

1. **Location of Business/Farm** (provide actual location, not mailing address if different):

Street Address _____ City/Township/County _____ State _____ Zip Code _____

2. **Date Business Commenced or Farm Purchased:** _____

3. **Principle Product or Service:** _____

4. **Type of Business/Farm:** Sole Proprietor Partnership Corporation - Corporation type: _____

5. **Number of Employees:** _____

6. Owners/Partners

List parent owner(s) above. If parent(s) have non-parent partners, provide name, relationship to parent(s) and percentage of ownership below. If there are more than three additional owners, provide information in Remarks on the last page of this form.

Name of owner/partner _____ %
Percentage of ownership

Relationship to parent owner _____

Name of owner/partner _____ %
Percentage of ownership

Relationship to parent owner _____

Name of owner/partner _____ %
Percentage of ownership

Relationship to parent owner _____

Business Only

7. Monthly mortgage payment on the business \$ _____

8. Is this business part of your home? Yes No If yes, what percentage of home is claimed for business use? _____%

Business - Income and Expenses

Enter amounts for the full year (January 1 through December 31)

| 9. Business Income | 2016 | 2017 |
|---|-------------|-------------|
| a. Gross receipts of sales less returns and allowances | \$ | \$ |
| b. Cost of goods sold and/or operations (Don't include salaries paid to yourself, your dependents or others, or any item listed below.) | \$ | \$ |
| c. Gross profit (Line 9a minus 9b) | \$ | \$ |
| d. Other business income | \$ | \$ |
| e. Total Income (Add 9c and 9d) | \$ | \$ |

| 10. Business Deductions (Don't include any amount entered in 9b above.) | 2016 | 2017 |
|---|-------------|-------------|
| a. Depreciation | \$ | \$ |
| b. Interest expense | \$ | \$ |
| c. Rent on business property | \$ | \$ |
| d. Parents' W-2 wages from this business | \$ | \$ |
| e. Salaries and wages paid to other family members (not the parent) employed in the business. Name and Relationship: | | |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| f. All other salaries and wages | \$ | \$ |
| g. Other business expenses (Itemize on a separate sheet any single item over \$1,000.) | \$ | \$ |
| h. Total Deductions (Add 10a-g) | \$ | \$ |

| 11. Net Profit (or Loss) | 2016 | 2017 | Estimated 2018 |
|---|-------------|-------------|-----------------------|
| a. Net profit (or loss) (9e minus 10h) | \$ | \$ | \$ |
| b. Your share of net profit (or loss) (Multiply 11a by your percentage of ownership.) | \$ | \$ | \$ |

Farm Only

12. Monthly mortgage payment on the farm \$ _____

13. Do you live on this farm? Yes No

| 14. Total Acres Owned | Market value per acre | Number of acres owned | Number rented to others |
|-----------------------------------|-----------------------|-----------------------|-------------------------|
| a. Tillable land | \$ | | |
| b. Non-tillable land | \$ | | |
| c. Woodlands and waste | \$ | | |
| d. Agricultural reserve | \$ | | |
| e. Total Acres (Add 14a-d) | | | |

Farm - Income and Expenses

If farm income is reported on an accrual basis, the required information can be found on IRS Form 1040, Schedule F, Part III. In this case, disregard questions 15 a-c below and begin your entries with Gross Income in question 15d.

If you have gains or losses from the sale or exchange of livestock and/or farm machinery, report the full amount of such gains or losses in 17b below. Don't include in this question gains or losses arising from the sale or exchange of other property, as reported on your IRS Form 1040, Schedule D.

| 15. Farm Income | 2016 | 2017 |
|--|------|------|
| a. Profit (or loss) on sales of livestock and other items purchased for resale | \$ | \$ |
| b. Sales of livestock and produce raised | \$ | \$ |
| c. Other farm income | \$ | \$ |
| d. Gross Income (Add 15a-c) | \$ | \$ |

| 16. Farm Expenses | 2016 | 2017 |
|--|------|------|
| a. Farm deductions less depreciation | \$ | \$ |
| b. Depreciation | \$ | \$ |
| c. Total Expenses (Add 16a and b) | \$ | \$ |

| 17. Net Profit (or Loss) | 2016 | 2017 | Estimated 2018 |
|---|------|------|----------------|
| a. Net farm profit (or loss) (15d minus 16c) | \$ | \$ | \$ |
| b. Farm-Related Capital Gains (or Losses) from sale or exchange of livestock and farm machinery | \$ | \$ | \$ |
| c. Net Profit (or Loss) (Add 17a and 17b) | \$ | \$ | \$ |
| b. Your share of net profit (or loss) (Multiply 17c by your percentage of ownership.) | \$ | \$ | \$ |

Business/Farm Assets

Column C should reflect the fair market value of the business or farm (a reasonable estimate of what each asset is worth and could be sold for). Filers of IRS Form 1120, 1120S, or 1065 should refer to Schedule L to complete columns A and B. If you don't file any of these IRS forms, you may leave columns A and B blank.

Answer all questions in this section based on tax year 2016

| | Column A | Column B | Column C |
|--|-------------------------------------|-------------------------------|--------------------------------------|
| | Book Value at Beginning of Tax Year | Book Value at End of Tax Year | Fair Market Value at End of Tax Year |
| 18. Current Assets | | | |
| a. Cash and short-term investments | \$ | \$ | \$ |
| b. Receivables (total) | \$ | \$ | \$ |
| c. Allowance for bad debts | \$ | \$ | \$ |
| d. Inventories | \$ | \$ | \$ |
| e. Other current assets not included above (Do not include loans to partners or shareholders.) | \$ | \$ | \$ |
| f. Total current assets (Add 18a, b, d, and e, then subtract 18c) | \$ | \$ | \$ |

| | Book Value at Beginning of Tax Year | Book Value at End of Tax Year | Fair Market Value at End of Tax Year |
|---|-------------------------------------|-------------------------------|--------------------------------------|
| 19. Fixed Assets | | | |
| a. Land | \$ | \$ | \$ |
| b. Buildings (purchase price) | \$ | \$ | \$ |
| c. Machinery and equipment (purchase price) | \$ | \$ | \$ |
| d. Other fixed assets | \$ | \$ | \$ |
| e. Total fixed assets (Add 19a-d) | \$ | \$ | \$ |

| | Accumulated Depreciation at Beginning of Tax Year | Accumulated Depreciation at End of Tax Year |
|--|---|---|
| 20. Fixed Assets - Depreciation | | |
| a. Accumulated depreciation on buildings | \$ | \$ |
| b. Accumulated depreciation on machinery | \$ | \$ |
| c. Total depreciation (Add 20a and b) | \$ | \$ |

| | Book Value at Beginning of Tax Year | Book Value at End of Tax Year | Fair Market Value at End of Tax Year |
|---|-------------------------------------|-------------------------------|--------------------------------------|
| 21. All Other Assets | | | |
| a. Total loans to partners or shareholders | \$ | \$ | \$ |
| Itemize by partner or shareholder – Names: | | | |
| | \$ | \$ | \$ |
| | \$ | \$ | \$ |
| | \$ | \$ | \$ |
| | \$ | \$ | \$ |
| b. Loans to others (not partners or shareholders) | \$ | \$ | \$ |
| c. All other assets | \$ | \$ | \$ |
| d. Total other assets (Add 21a–c) | \$ | \$ | \$ |

| | Book Value at Beginning of Tax Year | Book Value at End of Tax Year | Fair Market Value at End of Tax Year |
|--|-------------------------------------|-------------------------------|--------------------------------------|
| 22. Total Assets | | | |
| a. Total assets (Add 18f, 19e, and 21d) | \$ | \$ | \$ |
| b. Your share of total assets (Multiply line 22a by your percentage of ownership.) | \$ | \$ | \$ |

Business/Farm Liabilities

Answer all questions in this section based on tax year 2016

| 23. Liabilities | Beginning of Tax Year | End of Tax Year |
|---|------------------------------|------------------------|
| a. Accounts payable | \$ | \$ |
| b. Other current debts | \$ | \$ |
| c. Total current debts (Add 23a and b) | \$ | \$ |

| 24. Long-Term Liabilities (Don't include any amount listed above.) | Beginning of Tax Year | End of Tax Year |
|--|------------------------------|------------------------|
| a. Mortgages on land and buildings (Don't include home mortgages.) | \$ | \$ |
| b. Debts secured by equipment | \$ | \$ |
| c. Total loans from partner(s) or shareholder(s) | \$ | \$ |
| Itemize by shareholder – Names: | | |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| d. Other debts | \$ | \$ |
| e. Total long-term debts (Add 24a-d) | \$ | \$ |

| 25. Total Liabilities | Beginning of Tax Year | End of Tax Year |
|---|------------------------------|------------------------|
| a. Total liabilities (Add 23c and 24e) | \$ | \$ |
| b. Your share of total liabilities (Multiply line 25a by your percentage of ownership.) | \$ | \$ |

Remarks

Use this space to explain any special circumstances. If more space is required, include a letter with this form.

Signatures

Parent 1's signature _____
Date Completed

Parent 2's signature _____
Date Completed