

Financial Aid Application Worksheet 2020-2021 School Year



Completing the application online is easy, fast and secure. Visit http://www.mytads.com/ to start the application.

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This is a worksheet to help you prepare to fill out the TADS Financial Aid Application and WILL NOT be accepted as an application.

You will need the following supporting documentation before you begin:

- · Most recently filed federal taxes
- Most Recent W-2's received by all Parents/Guardians listed on application
- · Recent pay stubs of jobs that Parents/Guardians currently hold
- All documentation that establishes how much miscellaneous monthly or yearly income you currently receive (i.e. welfare, food stamps, unemployment, workers' compensation)
- All corporate, partnership and trust tax forms, if a Parent/Guardian owns 20% or more interest in a corporation or partnership or if any member of the household owns 20% or more interest in a trust
- · Other documentation (recent utility bills, daycare expense, etc.,) may be required

SECTION 3 List all jobs held by Parent(s)/Guardian(s) since January 1, 2019, even if no longer at this job

If Parents/Guardians have held more than four jobs since January 1, 2019, please see your financial aid administrator for an addendum. If a Parent/Guardian only received a Form 1099, enter that in Section 4.

- **4.** 2019 Wages, Tips, Other Compensation: This value can be found in Box 1 of your 2019 W-2. If you do not have your 2019 W-2 yet, use the year-to-date total off of your last December 2019 paycheck. You may fax the W-2 in later as long as it is before the application deadline.
- **5.** 2020 Estimated Wages, Tips, Other Compensation for this job: If you estimate that your 2020 income from a job will be lower than 2019 income, please attach an explanation of why you believe that will happen.
- 2. Employer
- **4.** 2019 Wages, Tips, Other Compensation
- **5.** 2020 Estimated Wages, Tips, Other Compensation

SECTION 4 List Business, Farm, Corporation, Partnership, Trust and Miscellaneous Income since January 1, 2019

Complete this section even if the business recently closed, or has just opened. Find your relevant tax form below and enter the corresponding line number values for each field on the application. For example: If you filed Form 1065 because you are involved in a Partnership, you should find 'Partnership - Form 1065'in the section below. You will then notice that there are two numbers, **5.** and **6.** Listed after each number is the action you need to take for that item. Continuing with the Partnership example, you would look at **5.** and notice that it says'Line 22'. Find Line 22 on the Partnership Form 1065 and enter that number into **5.** 2019 Actual Net Profit on this application. You are required to submit all tax documentation, profit and loss statements and balance sheets along with your application.

5. 2018 Actual Net Profit

6. 2018 Actual Depreciation

7. 2019 Estimated Net Profit

Group 1: No additional fee is required if you submitted tax documentation to the federal government for the following group: Miscellaneous Income-Form 1099: 5. Line 7, 6. Leave blank Profit/Loss from Business-Schedule C: 5. Line 31, 6. Line 13 Profit/Loss from Business-Schedule C-EZ: 5. Line 3, 6. Leave blank Profit/Loss from Farm-Schedule F: 5. Line 34, 6. Line 14

Profit/LossfromFarm-ScheduleF: **5.**Line 34, **6.**Lin Estates and Trusts-Form 1041: **5.**Line 22, **6.**Leave blank Partnership - Form 1065: **5.** Line 22, **6.** Line 16c

Group 2: An additional processing fee is required if you submitted taxdocumentation to the federal government for the following group (see School Directions for fee information):

Corporation (Short Form) - Form 1120-A: 5. Line 26, 6. Line 20c

Corporation - Form 1120: 5. Line 30, 6. Line 20

S Corporation - Form 1120S: 5. Line 21, 6. Line 14c

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SECTION 5 Other Monthly Income

		Monthly Social Security for:	Monthly Average Amount Received for:	Miscellaneous Monthly Income:		
1.	WelfareIncome	3. Parent(s)/Guardian(s)	6. Child Support	8. Taxable		
2.	FoodStamps	4. Dependents under 19	7. Alimony	9. Non-Taxable		
		5. Elderly Dependents				

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SECTION 6 Other Yearly Incom	me		2		
1. 2019 Interest & Dividends: This value is found by adding lines 2a, 2b and 3b on your 1040 tax return form.	1. 2019 Interest & Dividends	Yearly Unemployment 4. Actual 2019	Miscellaneous Yearly Income 6. 2019 Lump Sum		
6. and 7. Include any income that is not	Yearly Workers' Compensation				
accounted for elsewhere on this application.	2. Actual 2019	5. Estimated 2020	7. Recurring Yearly		
	3. Estimated 2020				
SECTION 7 If You Pay Rent		SECTION & Vearly Energy Evn	enses (renters and homeowners)		
	4. Manthly David	1			
Enter the amount you pay for rent alone; do not include utility expenses unless they are built into your monthly rental payments.	1. Monthly Rent	If you rent, do not include these expenses if they are already included in monthly rental payments. Homeowners should	1. Electricity		
sultimo your monthly reneal payments.	2. Yearly Renters' Insurance	report expenses.	2. Gas, Oil, Coal		
			3. Water, Sewage		
SECTION O Assets and Essential					
SECTION 9 Assets and Expense					
Fill out this section if you are a homeowner. 4. Current Market Value: If you have not had a	1. Year of Purchase	5. Amount Owed on Home Loans/Mortgages	8. 2019 Home Insurance		
recent appraisal on your property, use the most recent Real EstateTax Assessment.	2. Purchase Price	6. Monthly Mortgage Payment	 10. 2019 Rental Income (if not a single family dwelling) 11. 2019 Rental Expenses (if not a single family dwelling) 		
5. Amount Owed on Home Loans/Mortgages: Make sure to include any second mortgages in this figure.	3. Improvements/Additions				
10. 2019 Rental Income: Include rent or		7. 2019 Property Tax			
mortgage contributions from others living in home.	4. Current Market Value				
SECTION 10 Assets and Expen	ses – Real Estate other than Home		_		
Fill out this section if you own any other properties in addition to your home, including rental properties, land, etc.	7. 2019 Gross Property Income: List the total yearly gross income for properties other than home.	1. Number of Properties	5. Amount Owed for all Properties		
Current Market Value: If you have not had entrappraisals done on your properties, use	8. 2019 Gross Property Expenses: List total expenses for properties. Do not include	2. Purchase Price of all Properties	6. Total Monthly Loan/Mortgage Payment		
the most recent Real Estate Tax Assessments. 6. Total Monthly Loan/Mortgage Payment: List total monthly mortgage or loan payments	principal paid on loan or mortgage amounts.	3. Cost of Improvements/Additions	7. 2019 Gross Property Income		
for all properties other than home.		4. Current Market Value	8. 2019 Gross Property Expenses		
SECTION 11 Assets and Debt -	- Automobiles				
Please enter market value and current debt for the vehicles that you own in items 1., 2. and 3., and requested information for the vehicles	Information for vehicles that you own 1. # of Vehicles	Information for vehicles that you lease 4. # of Vehicles	6. YearlyInsuranceCostforAllVehicles		
that you are leasing in 4. and 5. 6. YearlyTotal of Vehicle Insurance Cost: Please enter the yearly cost of insurance for	2. Total Current Market Value	5. Total Monthly Lease			
all vehicles that you either own or lease.	3. Total Debt				



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SECTION 12 Assets – Recreati	onal Vehicles/	Boats	SECTIO	N 13 Assets – Cash, St	tocks, et	c.
1. Value:Include market value for all recreational vehicles that you own. A few examples of recreational vehicles are: Motor homes, boats, motorcycles, all terrain vehicles, personal watercrafts, snowmobiles and dune buggies. 2. Debt: Please list amount you owe for all of the recreational vehicles that you own.	2. Debt		along with case 2. Stocks, Secu	avings, Cash, CD's: ue of these accounts, sh on hand. rities, Bonds, Mutual Funds: ue of these accounts.		cking, Savings, Cash, CD's ks, Securities, Bonds, Mutual Funds
SECTION 14 Assets – Retiremen	nt Plans					
1. Current Total Value: Enter the total amount tha are worth. This value is not just the sum of 1. and 2 the total worth of the funds from a recent stateme 2019 contributions are still pending, please estimat 2. 2019 Contribution – Household: Enter the total Parents/Guardians contributed towards these funds If year 2019 contributions are still pending, please estimate 2. 2019 Contribution – Employer: Enter the total a employers of Parents/Guardians contributed toward during 2019. If year 2019 contributions are still pen estimate total.	et cotal. amount that stimate total. amount that stimate total. amount that dithese funds	L. Total CurrentValue elf Managed (IRA, SEP, etc ther Managed (401k, etc.	c.):	2. 2019 Contribution–Emplo Self Managed (IRA, SEP, etc.) Other Managed (401k, etc.):):	2019 Contribution—Household Self Managed (IRA, SEP, etc.): Other Managed (401k, etc.):
SECTION 15 Medical Expenses						
Medical/Dental and 2. Prescription Drugs: List only out-of-pocket expenses that will not be, or have not been covered by insurance. Include co-pay amounts here. Annual Insurance Premiums: If you pay insurance		Payments Made in 2019 Medical/Dental		Current Medical Debt Medical/Dental	3.	Annual Insurance Premiums Medical/Dental
premiums, list the corresponding amounts her Please list the total amount you pay in a year.		Prescription Drugs	I	Prescription Drugs		Prescription Drugs
		Prescription Eyewear		Prescription Eyewear		Prescription Eyewear
SECTION 16 Alimony and Child 2. Child Support Paid to Others (2019) 3. Est		nses rt to be paid to Others (202	0) 4. Alimon	yPaidto Others (2019) 5. E	Estimated A	alimony to be paid to others (2020)
SECTION 17 Day Care and/or E	lderly Care Exp	enses (include sum	mer camp e	xpenses)		
Do not include pre-kindergarten, as this is considered a school expense which should be listed in Section 22.	1. Dependent Nar		3. 2019 Paym		4. Estima	ated 2020 Payments
If you made tax deductible donations to non-profit organizations in 2019, list the three organizations you donated the most to and the amount of those donations.	Charity Name	rgest contributions)			4. 20190	Contributions

SECTIO	N 19 Miscellane	eous Debt (do not list	debt c	on home or pro	operty, medic	cal	debt, debt fo	r cars, boats,	or o	ther vehicles) 4
List the total outstanding dollar amount in each item. Do not include medical debt, vehicle debt, home loans, second mortgages			1. Cre	dit Card		4.	Loans–Friends or Relatives		6.	Education—Parent(s)/Guardian(s)
or home equity loans. If you have more than one credit card, add all card balances together and enter the total amount. Documentation of any debt may be required.			2. Bar	nk Loans		5.	Education-Dep	pendents	7.	Other Debt
5. Education – Dependents: List the total amount of education debt owed for dependants. Do not include dependents' tuition amount for the 2020-21 school year, list this amount online in Section 22.			3. Loa	n Companies					_	
7. Other Debi previously I		ot excluding all other debt								
SECTIO	N 21 Contribut	ions to Education (2	020–2	021)						
1. How much (in your opinion) can Parent(s)/Guardian(s) contribute toward the tuition of all dependents in this household next year?					ny other sources contribute toward the e applying for financial aid with this form?					
If you have m appropriate a 1040 tax form months or m custodial par living inyour 7. Depender	norethan five depender addendum forms. Defini m is a dependent. In add ore per year and who is ent, all children applying household and not on y at Earnings in 2019: If a d	pendents in the Hounts, please see your financial tion of "Dependent": Any child bition, any child who is living in under age 18 qualifies as a defor financial aid should be list our taxes. Do not list Parents, ependent held a job in 2019, librar earnings from stocks, second	aid admi d that you in your ho ependen ed as dep /Guardia st the ear	nistratorforthe u can claim on your ousehold for six t. If you are a non- endents, even if no ns in this section. rnings in this sectior	8. Depen 9. 529 Sa total amo 10. An schools wi do you thir 11. Exper outside of	ider ount mou Il exp nk is nses- tuiti	nt Current Saving gs Plan: If the d t saved here. int Dependent Car pect the depender reasonable for – Bus, Books, Unif on costs. Do not in	ependent has a some contribute: If a dent to contribute sor this dependent to comms, etc.: Include	pend nethi o cor exper ense	nses that the school requires you to pay s such as fees to play sports or fees for
Dependent Number	7. Dependent Earnings in 2019	8. Dependent Current Savings	9. 529	Savings Plan			ent can contribute savings for school		. Ехр	enses - Bus, Books, Uniforms, Fees, etc.
#1										
#2	-									
#3		_								
#4		_								
#5		_								

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When you are ready to fill out an online application, go to www.mytads.com, click on 'Financial Aid' and follow directions.

WORKSHEET DONOTSUBMIT

Contact TADS

Online Chat, E-mail, Telephone or Fax:

We are available to assist you with questions in filling out your application or to check the status of your application through the following:

Online Chat: Go to http://www.secure.tads.com and click on the icon for live help. You will be connected to a TADS

E-mail: representative. **tads**-support@communitybrands.com

Toll-free: 1.800.477.8237 We are available Monday through Friday, 7:00 a.m. to 8:00 p.m. Central Time. 612.548.3320 We are available Monday through Friday, 7:00 a.m. to 8:00 p.m. Central Time.

Fax Number: 612.548.3326