

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.

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 a Parent/Guardian only received a Form 1099, enter that in Section 4.

- 2. 2019 Wages, Tips, Other Compensation: This value can be found in Box1of 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.
- 3. 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.

- 1. Employer Name
- 2. 2019 Wages, Tips & Other Compensation
- 3. 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, 1. and 2. Listed after each number is the action you need to take for that item. Continuing with the Partnership example, you would look at 1. and notice that it says 'Line 22'. Find Line 22 on the Partnership Form 1065 and enter that number into 1. 2019 Actual Net Profit on this application.

1. 2019 Actual Net Profit

2. 2019 Actual Depreciation

Group 1: No additional fee is required if you submitted tax documentation to the federal government for the following group:

- Miscellaneous Income Form 1099: 1. Line 7, 2. Leave blank
- Business Schedule C: 1. Line 31, 2. Line 13
- Business Schedule C-EZ: 1. Line 3, 2. Leave blank
- Farm Schedule F: 1. Line 34, 2. Line 14
- Estates and Trusts Form 1041: 1. Line 22, 2. Leave blank
- Partnership Form 1065: 1. Line 22, 2. Line 16c

Group 2: An additional processing fee is required if you submitted tax documentation to the federal government for the following group:

- Corporation (Short Form) Form 1120-A: 1. Line 26, 2. Line 20c
- Corporation Form 1120: 1. Line 30, 2. Line 20
- S Corporation Form 1120S: 1. Line 21, 2. Line 14c

3. 2020 Estimated Net Profit

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1. Welfare Income	Monthly Social Security for: 3. Parent(s)/Guardian(s)	Monthly Average Amount Received for: 6. Child Support	Miscellaneous Monthly Income: 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. & 7. Include any income that is not	Yearly Workers' Compensation 2. Actual 2019	5. Estimated 2020	7. Recurring Yearly		
accounted forelse where on this application.	3. Estimated 2020				
SECTION 7 If You Pay Rent		SECTION 8 Yearly Energy Ex	penses (renters and homeowners)		
Enter the amount you pay for rent alone; do not include utility expenses unless they are built in	1. Monthly Rent	If you rent, do not include these expenses if they are already included in monthly	1. Electricity		
to your monthly rental payments.	2. Yearly Renters' Insurance	rental payments. Homeowners should report expenses.	2. Gas, Oil, Coal		
		-	3. Water, Sewage		
SECTION 9 Assets and Expense	es – Home				
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. 5. Amount Owed on Home Loans &	2. Purchase Price	6. Monthly Mortgage Payment	10. 2019 Rental Income (if not a single family dwelling)		
Mortgages: Make sure to include any second mortgages in this figure. 10. 2019 Rental Income: Include rent or	3. Improvements/Additions	7. 2019 Property Tax	11. 2019 Rental Expenses		
mortgage contributions from others living in home.	4. Current Market Value		(if not a single family dwelling)		
SECTION 10 Assets and Expen	ses – Real Estate other than Hom	ie			
Fill out this section if you own any other properties in addition to your home,	7. 2019 Gross Property Income: List the total yearly gross income for properties other	1. Number of Properties	5. Amount Owed for all Properties		
including rental properties, land, etc. 4. Current Market Value: If you have not had recent appraisals done on your properties, use	than home. 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. YearlyInsurance Cost for All Vehicles		
that you are leasing in 4. and 5. 6. Yearly Total 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		_		

SECTION 43				050 5 10	N 40		
SECTION 12 Assets – Recreation	onal Vehicle	es/	Boats		N 13 Assets – Cash, Sto		
1. Value: Include market value for all recreational vehicles that you own. A few examples of recreational vehicles are: Motor homes, boats,	 Value Debt 			 Checking, Savings, Cash, CD's: List current value of these accounts, along with cash on hand. Stocks, Securities, Bonds, Mutual Funds: List current value of these accounts. 			Checking, Savings, Cash, CD's
motorcycles, all terrain vehicles, personal watercrafts, snowmobiles and dune buggies.							Stocks, Securities, Bonds, Mutual Funds
2. Debt: Please list amount you owe for all of the recreational vehicles that you own.							
SECTION 14 Assets – Retiremer	nt Plans						
 Current Total Value: Enter the total amount that these funds are worth. This value is not just the sum of 2. and 3., but rather the total worth of the funds from a recent statement. If year 2019 contributions are still pending, please estimate total. 2019 Contribution – Household: Enter the total amount that Parents/Guardians contributed towards these funds during 2019. If year 2019 contributions are still pending, please estimate total. 2019 Contribution – Employer: Enter the total amount that employers of Parents/Guardians contributed toward these funds during 2019. If year 2019 contributions are still pending, please estimate total. 			. Total Current Value elf Managed (IRA, SEP, etc	c.): Self Managed (IRA, SEP, etc		•	3. 2019 Contribution—Household Self Managed (IRA, SEP, etc.):
			ther Managed (401k, etc.)			_	Other Managed (401k, etc.):
SECTION 15 Medical Expenses							
1. 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.			Payments Made in 2019 Medical/Dental	2.	Current Medical Debt Medical/Dental		3. Annual Insurance Premiums Medical/Dental
3. Annual Insurance Premiums: If you pay insurance premiums, list the corresponding amounts here Please list the total amount you pay in a year.			Prescription Drugs		Prescription Drugs	_	Prescription Drugs
			Prescription Eyewear		Prescription Eyewear	_	Prescription Eyewear
						_	
SECTION 16 Alimony and Child	• • • • • •						
1.Child Support Paid to Others (2019) 2. Estin	mated Child Sup	port	t to be paid to Others (2020	3. Alimony	Paid to Others (2019) 4. 1	Estin	nated Alimony to be Paid to Others (2020)
SECTION 17 Day Care and/or El	lderly Care E	хр	enses (include sumr	ner camp e	xpenses)		
Do not include pre-kindergarten, as this is considered a school expense which should be listed in Section 22.		Name		2. 2019 Payments		3. E	Estimated 2020 Payments
		_				_	
SECTION 18 Charitable Giving (lis	t your three	lar	gest contributions)				
If you made tax deductible donations to non-profit organizations in 2019, list the three organizations you donated the most		ne				2. 2	2019 Contributions
to and the amount of those donations.						_	

SECTIO	N 19 Miscellan	eous Debt (do not list	debt on home or p	roperty, medi	al debt, debt for cars,	boats, or o	other vehicles) 4	
include med	ical debt, vehicle debt, ho	nount in each item. Do not ome loans, second mortgages ore than one credit card,			4. Loans–Friends or Relatives		Education–Parent(s)/Guardian(s)	
add all card b	palances together and ent ation of any debt may b	ter the total amount.	2. Bank Loans	_	5. Education – Dependents	7	Other Debt	
debt owed for	or dependants. Do not inc he 2020-21 school year, li:	otal amount of education clude dependents'tuition st this amount online in	3. Loan Companies					
7. Other Deb		bt excluding all other debt						
SECTIO	ON 21 Contribut	ions to Education (2	020–2021)					
contrib	uch (in your opinion) ca ute toward the tuition of nold next year?	n Parent(s)/Guardian(s) all dependents in this	2. How much per year law to contribute to for financial aid w	ward the education			other sources contribute toward the se applying for financial aid with this form	
SECTIO	N 23 List all Depe	ndents in the Housel	nold; do not inclu	de Parent(s)/0	iuardian(s)			
add any add 1040 tax fo months or custodial pai inyour hou 1. Depende	itional Dependents. Defir rm is a dependent. In ad more per year and who rent, all children applying i sehold and not on your nt Earnings in 2019: If a do	nts, please see submit this appartion of "Dependent": Any chil dition, any child who is living is underage 18 qualifies as a for financial aid should be listed taxes. Do not list Parents/Guaependent held a job in 2019, list parnings from stocks, securities	d that you can claim on yo in your household for s dependent. If you are a r as dependents, even if not ardians in this section. the earnings in this sectio	our 3. 529 S ix amount non- cliving will exper think is in the solution outside outsid	avings Plan: If the dependen saved here. int Dependent Can Contribute: left the dependent to contribute reasonable for this dependences—Bus, Books, Uniforms, etc.	t has a 529 C fa dependent something too nt to contrib : Include expe optional exper	nses that the school requires you to pay ses such as fees to play sports or fees for	
Dependent Number	1. Dependent Earnings in 2019	2. Dependent Current Savings	3. 529 Savings Plan		ndent can contribute to educa gs/savings for school year 20		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

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:

E-mail: 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.

Telephone: 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