



# Parents' Financial Statement

## Household Information

### Parent/Guardian Information

Enter names exactly as they appear on tax/official forms.

#### Parent/Guardian A

Parent/Guardian A will be our primary contact for correspondence.

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Address \_\_\_\_\_ Suite/Apt. No \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_ Gender  Male  Female  Nonbinary

Email \_\_\_\_\_ Phone \_\_\_\_\_  Home  Work  Cell

Occupation \_\_\_\_\_ Personal Circumstances (select all that apply)

Employer \_\_\_\_\_

Years with Employer \_\_\_\_\_

Job Title \_\_\_\_\_

If Parent/Guardian A has more than one job, explain: \_\_\_\_\_

\_\_\_\_\_

- Expecting Child
- Recently Divorced or Separated
- Widowed
- Non-Custodial Guardian
- Military (Active or Veteran) or Clergy Member
- Faculty or Staff at the School

#### Parent/Guardian B

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Address \_\_\_\_\_ Suite/Apt. No \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_ Gender  Male  Female  Nonbinary

Email \_\_\_\_\_ Phone \_\_\_\_\_  Home  Work  Cell

Occupation \_\_\_\_\_ Personal Circumstances (select all that apply)

Employer \_\_\_\_\_

Years with Employer \_\_\_\_\_

Job Title \_\_\_\_\_

If Parent/Guardian A has more than one job, explain: \_\_\_\_\_

\_\_\_\_\_

- Expecting Child
- Recently Divorced or Separated
- Widowed
- Non-Custodial Guardian
- Military (Active or Veteran) or Clergy Member
- Faculty or Staff at the School



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## Other Parent

If the applicant(s) has another biological or legal (adoptive) parent not listed above, complete this section.

Indicate the relationship between the parents:  Never Married  Divorced  Separated, no court action  Separated, legally  
Year of divorce/separation (yyyy) \_\_\_\_\_ Is there a joint custody agreement?  Yes  No

Other Parent's Full Name \_\_\_\_\_

Address \_\_\_\_\_ Suite/Apt. No \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

## Applicant Information

Complete this section for each child applying to a subscriber school for financial aid. Enter names exactly as they appear on tax/official forms.

### Applicant A

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_

Birthdate (mm/dd/yyyy) \_\_\_\_\_ Gender  M  F  NB Last 4 digits of Social Security # \_\_\_\_\_

Current Grade \_\_\_\_\_ Current School \_\_\_\_\_ Grade entering Fall 2021 \_\_\_\_\_

Lives with:  Parent/Guardian A & B  Parent/Guardian A  Parent/Guardian B  Other (identify) \_\_\_\_\_

### Applicant B

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_

Birthdate (mm/dd/yyyy) \_\_\_\_\_ Gender  M  F  NB Last 4 digits of Social Security # \_\_\_\_\_

Current Grade \_\_\_\_\_ Current School \_\_\_\_\_ Grade entering Fall 2021 \_\_\_\_\_

Lives with:  Parent/Guardian A & B  Parent/Guardian A  Parent/Guardian B  Other (identify) \_\_\_\_\_

### Applicant C

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_

Birthdate (mm/dd/yyyy) \_\_\_\_\_ Gender  M  F  NB Last 4 digits of Social Security # \_\_\_\_\_

Current Grade \_\_\_\_\_ Current School \_\_\_\_\_ Grade entering Fall 2021 \_\_\_\_\_

Lives with:  Parent/Guardian A & B  Parent/Guardian A  Parent/Guardian B  Other (identify) \_\_\_\_\_



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## Non-Applicant Dependent Information

Complete this section for all dependent individuals in your household who are NOT applying for financial aid at a subscriber school. A dependent is identified as an individual—child or adult—for whom you provide at least 50% of their financial support each year. Include children for whom you provide support, even if the child does not live with you. If you have dependents who are not children, include them here. **DO NOT** add anyone to this section you have already identified as a Parent/Guardian or an Applicant.

### Non-Applicant Dependent 1

Full Name \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_  
Gender M / F / NB Current Grade \_\_\_\_\_ Current School \_\_\_\_\_

### Non-Applicant Dependent 2

Full Name \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_  
Gender M / F / NB Current Grade \_\_\_\_\_ Current School \_\_\_\_\_

### Non-Applicant Dependent 3

Full Name \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_  
Gender M / F / NB Current Grade \_\_\_\_\_ Current School \_\_\_\_\_

## School Selection

For each applicant, identify the subscriber schools to which your family's PFS should be sent. You will be able to search for schools by school name and/or location from within the online application if you do not know the Partner code(s).

Applicant	Partner Code (if known)	School Name	State	At this school, the student will be...Day or Boarding? New or Returning?



# Parents' Financial Statement

## Family Income

### Basic Tax Information

Have you complete your 2021 Tax Return?  Yes  No (if no, select Estimated)

Income filing status for 2021:  Single  Married, Filing Jointly  Married, Filing Separately  
 Head of Household  Did Not File  Qualifying Widow(er) with Dependent Child

If you filed or will file and IRS Schedule A, what did you or will you report as your total itemized deductions? (IRS Form 1040 – Schedule A, line 17) \$ \_\_\_\_\_

What did you or will you pay in total federal taxes in 2021? (IRS Form 1040, line 16 minus Schedule 2, line 4) \$ \_\_\_\_\_

### Total Taxable Income

#### Salary and Wages

Total salaries and wages can be found in Box 1 of the W2 form given to you by your employer. If you have more than one W2, add the amount from each W2.

	2021	2022 Estimated
Salary and wages for Parent/Guardian A:	\$	\$
Salary and wages for Parent/Guardian B:	\$	\$

#### Dividends & Interest Income

Refer to your 1099-INT statement (or line 2b from your 1040) for interest income and/or your 1099-DIV statement (or line 3b from your 1040) for dividend income.

	2021	2022 Estimated
Total interest income:	\$	\$
Total dividends:	\$	\$

#### Adjustments to Income

	2021	2022 Estimated
Total adjustments reported (IRS Form 1040–Schedule 1, line 22):*	\$	\$
Total IRA pre-tax payments (IRS Form 1040–Schedule 1, line 19):	\$	\$
Total Keogh, Simplified Employee Pension (SEP), SIMPLE, or other qualified plan payments (IRS Form 1040–Schedule 1, line 15):	\$	\$
Total deductible portion of self-employment tax (IRS Form 1040–Schedule 1, line 14):	\$	\$
*Itemize other adjustments:		



# Parents' Financial Statement

## Other Taxable Income

Inline help text is provided online to help you determine the total of any other taxable income you may have. This includes income you received from pensions, annuities, rental properties, royalties, estates or trusts, household expenses paid in lieu of alimony, unemployment compensation benefits, capital gains, and taxable Social Security benefits. These amounts are all listed in the Income section on your IRS Form 1040.

**Note:** If you are a part of a Partnership or S-Corporation, you need to complete Section 7: Other Taxable Income (PFS question 7q).

	2021	2022 Estimated
Total other taxable income:	\$	\$

## Total Nontaxable Income

### Child Support Received

	2021	2022 Estimated
Child support received for ALL children:	\$	\$

### Social Security Benefits

	2021	2022 Estimated
Social Security benefits received by all members of your household:	\$	\$

## Other Nontaxable Income

Inline help text is provided online to help you determine the total of any nontaxable income you may have. This includes payments made to tax-deferred pension and savings plans as reported on W2 forms (box 12, labeled D, E, F, G, or H). They include qualified retirement plans (including 401k and 403 plans), pre-tax contributions to fringe benefits plans (such as a cafeteria or 125 plan), cash support, gifts, money paid to you (or to others on your behalf) by relatives or non-relatives, amount paid or provided by a separated or divorced spouse (in lieu of child support) to cover household expenses; value of allowances received for housing, food, and other living expenses as a member of the military or clergy; cash value of earned income credits, welfare benefits, veteran's benefits, and worker's compensation; income received from tax-exempt investments, income earned abroad, and other untaxed income/benefits not specified above.

	2021	2022 Estimated
Total other nontaxable benefits	\$	\$
Total other nontaxable income	\$	\$
Miscellaneous other nontaxable income	\$	\$



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## Student Income

### Student Income

	Did Applicant file a 2021 Federal Tax Return?	2021	2022 Estimated
Applicant A _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$
Applicant B _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$
Applicant C _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$

### Student Assets

Enter the total value of each student applicant's assets. Include student's saving account(s), IRA, stocks, bonds, inheritances, trust funds, real estate, 529 savings plan accounts own by the student, cash value of annuities, and education insurance policies. Do NOT include life insurance policies, stamp/coin collections, or value of personal property held on behalf of the student.

	Total Value	Itemize Assets
Applicant A _____	\$	
Applicant B _____	\$	
Applicant C _____	\$	

## Family Assets and Debts

### Real Estate

	2021	2022 Estimated
If you pay RENT on the home you current live in, provide the TOTAL amount paid/will pay in rent for the entire year.	\$	\$

If you OWN the home you currently live in, provide the following informaiton:

Purchase Year	Purchase Price	Present Market Value	Unpaid Principal on 1st Mortgage	Annual Payments on 1st Mortgage
	\$	\$	\$	\$

If you have a 2nd mortgage or home equity loan, provide the following information:

Unpaid Principal on 2nd Mortgage	Annual Payments on 2nd Mortgage	Describe the purpose of the 2nd mortgage or equity loan:
\$	\$	



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## Other Real Estate

If you own property other than your primary home, provide the following information for each property. If a property is used as a rental (Schedule E), report the income or loss on question 7q of the Other Taxable Income section. If you have a Schedule E and manage the rental property as a business, you will include the income/loss in questions 16-17 of the Business/Farm section of the PFS.

### Property 1

<b>Address</b>		<b>Purpose/Use of Property</b>	
		<input type="checkbox"/> Additional family income	<input type="checkbox"/> Rental income
		<input type="checkbox"/> Vacation home/timeshare	<input type="checkbox"/> Vacant land
		<input type="checkbox"/> Other: _____	
<b>Purchase Price</b>	<b>Present Market Value</b>	<b>Unpaid Principal on 1st Mortgage</b>	<b>Annual Total Payments on 1st Mortgage</b>
\$	\$	\$	\$

### Property 2

<b>Address</b>		<b>Purpose/Use of Property</b>	
		<input type="checkbox"/> Additional family income	<input type="checkbox"/> Rental income
		<input type="checkbox"/> Vacation home/timeshare	<input type="checkbox"/> Vacant land
		<input type="checkbox"/> Other: _____	
<b>Purchase Price</b>	<b>Present Market Value</b>	<b>Unpaid Principal on 1st Mortgage</b>	<b>Annual Total Payments on 1st Mortgage</b>
\$	\$	\$	\$

### Property 3

<b>Address</b>		<b>Purpose/Use of Property</b>	
		<input type="checkbox"/> Additional family income	<input type="checkbox"/> Rental income
		<input type="checkbox"/> Vacation home/timeshare	<input type="checkbox"/> Vacant land
		<input type="checkbox"/> Other: _____	
<b>Purchase Price</b>	<b>Present Market Value</b>	<b>Unpaid Principal on 1st Mortgage</b>	<b>Annual Total Payments on 1st Mortgage</b>
\$	\$	\$	\$



# Parents' Financial Statement

## Vehicles

Provide the following information about all vehicles (cars, recreational vehicles, boats) owned or leased by your family.

### Vehicle 1

<b>Type</b>	<b>Make</b>	<b>Model</b>	<b>Year</b>
<input type="checkbox"/> car <input type="checkbox"/> boat <input type="checkbox"/> recreational vehicle			
<b>Ownership Status</b>	<b>Current Debt</b>	<b>Annual Lease Cost</b>	<b>Notes</b>
<input type="checkbox"/> own <input type="checkbox"/> lease <input type="checkbox"/> employer/business provided	\$	\$	

### Vehicle 2

<b>Type</b>	<b>Make</b>	<b>Model</b>	<b>Year</b>
<input type="checkbox"/> car <input type="checkbox"/> boat <input type="checkbox"/> recreational vehicle			
<b>Ownership Status</b>	<b>Current Debt</b>	<b>Annual Lease Cost</b>	<b>Notes</b>
<input type="checkbox"/> own <input type="checkbox"/> lease <input type="checkbox"/> employer/business provided	\$	\$	

### Vehicle 3

<b>Type</b>	<b>Make</b>	<b>Model</b>	<b>Year</b>
<input type="checkbox"/> car <input type="checkbox"/> boat <input type="checkbox"/> recreational vehicle			
<b>Ownership Status</b>	<b>Current Debt</b>	<b>Annual Lease Cost</b>	<b>Notes</b>
<input type="checkbox"/> own <input type="checkbox"/> lease <input type="checkbox"/> employer/business provided	\$	\$	

## Other Assets & Debts

### Bank Accounts

Total value of both parents'/guardians' checking and savings accounts (interest bearing and non-interest bearing):

\$ \_\_\_\_\_

### Investments

Total net value of all investments (stocks, bonds, mutual funds, and cash value of whole life insurance policies owned by the Parents/Guardians):

\$ \_\_\_\_\_





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## Retirement Plans

Is there an employee retirement plan for Parent/Guardian A?  Yes  No      Parent/Guardian B?  Yes  No

Total value of company managed retirement plans, including pensions, 401k, 403b or SEP plans: \$ \_\_\_\_\_

Total household contribution for any pension, IRA, or SEP plans held by parents(s)/guardian(s): \$ \_\_\_\_\_

Total value of any self-managed retirement plans, including IRAs: \$ \_\_\_\_\_

Total household contribution for any 401k or 403b plan held by the parent(s)/guardian(s) \$ \_\_\_\_\_

## Debts

Total consumer debt (total balances from all credit card purchases you have not reported elsewhere on the PFS): \$ \_\_\_\_\_

Total outstanding debt for:

• Past education of the parent(s)/guardian(s): \$ \_\_\_\_\_

• Any loans taken with a Loan Company: \$ \_\_\_\_\_

• Any loans taken from friends or relatives: \$ \_\_\_\_\_

• From interest-bearing medical expenses: \$ \_\_\_\_\_

Total other outstanding debt: \$ \_\_\_\_\_

## Family Income

Information provided in this section helps schools better assess your full obligation to pay tuition and other educational expenses. Please be realistic about the amount you can contribute, keeping in mind that the primary responsibility for paying for your child's education lies with you.

## Educational Expenses

How many children (applicants and non-applicant dependents) are/will be receiving support from you in 2021? \_\_\_\_\_

How many will attend tuition-charging institutions (childcare centers, schools, or colleges)? \_\_\_\_\_

List all the tuition contributions you made and received in 2021-22:

• How much money did you contribute from your own earnings or assets (including loans)? \$ \_\_\_\_\_

• How much did you contribute from the applicant's earnings or assets? \$ \_\_\_\_\_

• How much did you receive from friends, relatives, trust funds, or other sources? \$ \_\_\_\_\_

From all combined sources, except financial aid, your 2021-22 tuition contribution was? \$ \_\_\_\_\_  
(add the above bullet-point amounts)

What is the estimated full cost of tuition for this applicant for the academic year 2021-22? \$ \_\_\_\_\_

How much financial aid did you receive? \$ \_\_\_\_\_



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List all the tuition contributions you **plan** to make in 2022-23:

- How much money will you contribute from your own earnings or assets (including loans)? \$ \_\_\_\_\_
- How much will you contribute from the applicant's earnings or assets? \$ \_\_\_\_\_
- How much will you receive from friends, relatives, trust funds, or other sources? \$ \_\_\_\_\_

From all combined sources, except financial aid, your 2022-23 tuition contribution will be: \$ \_\_\_\_\_  
(add the above bullet-point amounts)

What is the estimated full cost of tuition for this applicant for the academic year 2022-23? \$ \_\_\_\_\_

## Other Expenses

### Health Expenses

Do you have health insurance either through your employer or through the Affordable Care Act?  Yes  No

Do you carry health insurance through a business that you own?  Yes  No

Total amount you paid for health insurance premiums and plans: \$ \_\_\_\_\_

Total health expenses you paid out of pocket that were not reimbursed by insurance or nontaxable benefit accounts such as HSA, FSA, DCA, HSR, etc: \$ \_\_\_\_\_

### Child Support & Alimony Paid

	2021	2022 Estimated
Total amount you paid in child support for Applicant 1:	\$ _____	\$ _____
Total amount you paid in child support for Applicant 2:	\$ _____	\$ _____
Total amount you paid in child support for all other dependents:	\$ _____	\$ _____

Total amount you paid in alimony in 2020: \$ \_\_\_\_\_

What tax year did you begin making alimony payments? \_\_\_\_\_

### Additional Expenses

Total amount you paid in 2021 for utilities: \$ \_\_\_\_\_

Total amount of charitable contributions in 2021: \$ \_\_\_\_\_

Total amount you paid in 2021 for:

- Annual fee/club dues for charge more than \$250: \$ \_\_\_\_\_
- Camps and lessons for all members of your household: \$ \_\_\_\_\_
- Vacations for all members of your household: \$ \_\_\_\_\_

Total amount of additional/unusual expenses you incurred defined as acceptable: \$ \_\_\_\_\_



# Parents' Financial Statement

## Business/Farm

This information is only asked of families who report being a sole proprietor of or a partner in one or more businesses/farms. The PFS will ask you to complete this information for each business or farm you own. **Do NOT** combine information.

### Business Information

You will need to provide this information for each business/farm owned.

Owner(s)/partner(s) in business/farm: \_\_\_\_\_

Business/farm name: \_\_\_\_\_

Year business/farm operation began: \_\_\_\_\_ Business Type:  Sole Proprietorship  Partnership  S-Corporation

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Description of service or product: \_\_\_\_\_

### Business Income

If you are an owner/partner in more than one business/farm, provide the following for each business or farm you own.

**Note:** If you are a part of a Partnership or S-Corporation, you need to complete PFS section 7, Other Taxable Income (7q).

	2021	2022 Estimated
Gross receipts and sales:	\$	\$
Cost of goods sold and/or operations:	\$	\$
Other business/farm income:	\$	\$

### Business Expenses

If you are an owner/partner in more than one business/farm, provide the following for each business or farm you own.

	2021	2022 Estimated
Salaries/wages paid to you and your spouse:	\$	\$
Other wages:	\$	\$
Additional compensation:	\$	\$
Business property rent:	\$	\$
Business property mortgage:	\$	\$
Depreciation:	\$	\$
Other expenses (will need to explain):	\$	\$
Amount paid for self-employment tax:	\$	\$



# Parents' Financial Statement

## Business Assets and Debts

If you are an owner/partner in more than one business/farm, provide the following for each business or farm you own.

### Business and/or Farm Assets

	2021	2022 Estimated
Current business/farm assets minus amounts reserved for bad debts:	\$	\$
Land and buildings (present market value):	\$	\$
Case reserve for depreciation:	\$	\$
Other capital assets of the business/farm:	\$	\$
Accounts receivable:	\$	\$
Other business/farm assets:	\$	\$

### Business and/or Farm Debts

	2021	2022 Estimated
Mortgage on land and buildings:	\$	\$
Debts on equipment and machinery:	\$	\$
Other business on farm debts:	\$	\$

## Other Information

This Final section of the PFS is Other Consideration. Use this available text box to provide any other information, explanation or details you believe are pertinent to your family's situation when the school(s) consider your request for financial aid.