





### Parents' Income and Expense Information

#### 8 Basic tax information:

- 8A** The information on this form is from a 2008 tax return that is:  Completed  Estimated
- 8B** Income tax filing status for: (2008)  1. Single  2. Married, joint return  3. Married, filing separately  4. Head of household  5. Do not file (2009)  1. Single  2. Married, joint return  3. Married, filing separately  4. Head of household  5. Do not file
- 8C** Did the student applicant(s) file a federal tax return for 2008?  
 Student A  Yes  No Student B  Yes  No Student C  Yes  No
- 8D** How many federal income tax exemptions did you or will you claim for 2008? .....
- 8E** How many children, including the student applicant(s), are receiving support from you in 2009? .....
- 8F** How many children entered in question 8E will be attending full-time child care, tuition-charging preschools, schools, or colleges in 2009–2010? .....

		2008	Estimated 2009
<b>9</b> Total taxable income before deductions:	<b>9A</b> Salaries and wages for parent, stepparent, or guardian in 6A.....	\$	\$
	<b>9B</b> Salaries and wages for parent, stepparent, or guardian in 6B.....	\$	\$
	<b>9C</b> Taxable dividends and/or interest income from 1099 statement(s).....	\$	\$
	<b>9D</b> Alimony received or estimated (do not include child support).....	\$	\$
	<b>9E</b> Net profit/loss from business and/or farm (if loss use parentheses around figures).....	\$	\$
	Check only one box. <input type="checkbox"/> 1. parent, stepparent, or guardian in 6A <input type="checkbox"/> 2. parent, stepparent, or guardian in 6B <input type="checkbox"/> 3. both		
	<b>9F</b> Other taxable income.....	\$	\$
	<b>10A</b> Untaxed portion of payments to IRA.....	\$	\$
	<b>10B</b> Keogh plan payments and self-employed SEP deduction.....	\$	\$
	<b>11</b> Other IRS allowable adjustments to taxable income.....	\$	\$
<b>12</b> Total nontaxable income:	<b>12A</b> Child support received for all children.....	\$	\$
	<b>12B</b> Social security benefits for entire family.....	\$	\$
	<b>12C</b> Other nontaxable income (complete the worksheet on page 4 of the PFS and enter totals here).....	\$	\$
	<b>13</b> IRS total itemized deductions from IRS schedule A.....	\$	\$
<b>14</b> Total federal tax paid (2008 IRS 1040 or 1040A).....	\$	\$	
<b>15</b> Self-employment tax paid.....	\$	\$	
<b>16</b> Insurance and medical/dental expenses:	<b>16A</b> Total medical/dental expenses not reimbursed by insurance companies.....	\$	\$
	<b>16B</b> Total paid for medical/dental insurance plans.....	\$	\$
	<b>17</b> Unusual expenses (see lists of acceptable and nonacceptable expenses in the instructions).....	\$	\$



### Family Assets and Debts

<b>18A</b> Home (if owned) Year purchased	Total property insurance carried	Present market value	Unpaid principal on 1st mortgage	Annual payments on 1st mortgage
Purchase price \$	\$	\$	\$	\$
<b>18B</b> Do you have a second mortgage or equity loan on the home listed in 18A? <input type="checkbox"/> Yes <input type="checkbox"/> No If so describe the purpose of loan in area 32.			Unpaid principal on 2nd mortgage/equity loan(s)	Annual payments on 2nd mortgage/equity loan(s)
Year of 2nd mortgage	Year of equity loan	+	\$	\$
<b>18C</b> Enter the total amount of unpaid principal and annual payments on all mortgages and equity loans on your home.			Unpaid principal on all mortgages and equity loan(s) on your home	Annual payments on all mortgages and equity loan(s) on your home
			= \$	\$
<b>19</b> All other real estate (see instructions). Year purchased	Total property insurance carried	Present market value	Unpaid principal on all other Real Estate	Annual payments on all other Real Estate
Purchase price \$	\$	\$	\$	\$
<b>20</b> Bank accounts—total of parents' checking and savings (interest-bearing and noninterest bearing) accounts.				\$
<b>21</b> Investments—net value (stocks, bonds, mutual funds, etc.—see instructions). Do not include value of pensions, retirement plans, IRA's, SEP's, or Keoghs.				\$
<b>22A</b> Debts (see list of acceptable debts in the instructions).				\$
<b>22B</b> Amount in 22A planned to be paid during 2009.			\$	
<b>22C</b> Consumer debts (see instructions).			\$	
<b>23</b> Complete item 23 only if you own a business and/or farm (see instructions). Be sure to complete the SSS Business/Farm Statement if the schools to which you are applying require it.		A. % of ownership	B. Assets	C. Debts
	%	\$	\$	\$
<b>24</b> Student assets (see instructions). Enter information only for student applicant(s) listed in Section A.		Student A	Student B	Student C
	\$	\$	\$	\$

# E

## Family Expenses and Additional Information

	Student A	Student B	Student C
<b>25A</b> How much can you afford for educational expenses for the 2009–2010 academic year <b>for each student applicant?</b> Do not leave blank.	\$ _____	\$ _____	\$ _____
<b>25B</b> How much can you afford for educational expenses for the 2009–2010 academic year <b>for all students listed in item 27?</b> Do not leave blank.	All students total	\$ _____	

For items 26 and 27, please provide information below **for all children**. Enter first and last names. The number of children should be the same as entered in item 8E. List student applicants first, in the same order as in Part I A, B, and C. List all children, those applying for aid and those not applying for aid. *Continue in area 32 if necessary.*

### 26 Current Year (2008–2009)

A. Full name	B. Name of present child care, preschool, school, or college (2008–2009)	C. Grade or year in school or college	D. Age	E. Cost of child care, preschool, school, or college	Amount of this cost paid by (F–J):				
				F. Parent or guardian	G. Financial aid grant	H. Loan	I. Students' assets & earnings	J. Friends, relatives, trust funds, & other sources <i>explain in 32</i>	
1. _____	_____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	
2. _____	_____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	
3. _____	_____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	
4. _____	_____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	

### 27 Next Year (2009–2010)

A. Full name	B. Name of child care, preschool, school, or college to be attended in (2009–2010)	C. Grade or year in school or college	D. <input type="checkbox"/> Living w/ person filing	E. Check appropriate boxes for 2008–2009 <input type="checkbox"/> Child care <input type="checkbox"/> Public school <input type="checkbox"/> Private school <input type="checkbox"/> College <input type="checkbox"/> Applied for aid	Dollar amounts that will be available to cover school costs for academic year 2008–2009			
				F. From parents' income & assets	G. From child support or social security	H. From students' assets & earnings	I. From friends, relatives, trust funds, & other sources <i>explain in 32</i>	
1. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$ _____	\$ _____	\$ _____	\$ _____
2. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$ _____	\$ _____	\$ _____	\$ _____
3. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$ _____	\$ _____	\$ _____	\$ _____
4. _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$ _____	\$ _____	\$ _____	\$ _____

- 2008**                      **Estimated 2009**
- 28** If you do not own your home and rent your family residence, provide total amount of annual rent you paid for 2008 and what you estimate for 2009 . . . . . \$ \_\_\_\_\_ \$ \_\_\_\_\_
- 29A** Is there an employee retirement plan for parent, stepparent, or guardian in 6A?  Yes  No  
 Is there an employee retirement plan for parent, stepparent, or guardian in 6B?  Yes  No
- 29B** Total employment-related child care expenses in 2008 . . . . . \$ \_\_\_\_\_
- 29C** Face value of parents' life insurance policies: . . . . . \$ \_\_\_\_\_  
 Term life    Whole life    Universal life    Single-premium life
- 29D** Annual cost of clubs requiring dues over \$250 in 2008 . . . . . \$ \_\_\_\_\_
- 29E** Costs of camps and lessons in 2008 . . . . . \$ \_\_\_\_\_
- 29F** Costs of vacations in 2008 . . . . . \$ \_\_\_\_\_
- 29G** Indicate student applicant(s) earnings for calendar year.
- |                     |          |          |
|---------------------|----------|----------|
| Student A . . . . . | \$ _____ | \$ _____ |
| Student B . . . . . | \$ _____ | \$ _____ |
| Student C . . . . . | \$ _____ | \$ _____ |
- 30A** List all family cars (if more than three cars are owned or leased, list additional cars in area 32).
- |                          |   |  |
|--------------------------|---|--|
| 1. (make and year) _____ | <input type="checkbox"/> Own <input type="checkbox"/> Lease | <input type="checkbox"/> Provided by employer/business |
| 2. (make and year) _____ | <input type="checkbox"/> Own <input type="checkbox"/> Lease | <input type="checkbox"/> Provided by employer/business |
| 3. (make and year) _____ | <input type="checkbox"/> Own <input type="checkbox"/> Lease | <input type="checkbox"/> Provided by employer/business |
- Current total car debt \$ \_\_\_\_\_ Annual lease expense \$ \_\_\_\_\_
- 30B** List all boats and other recreational vehicles owned or leased (if more than one vehicle is owned or leased, list additional vehicles in area 32). (make and year)
- 31** Complete this item only if student applicants' parents are separated, divorced, or have never been married.  
 Divorced    Separated, no court action    Legally separated    Never married  
 Year of divorce or separation \_\_\_\_\_ Is there a joint custody agreement?  Yes  No

Other parent's full name \_\_\_\_\_

Home address \_\_\_\_\_ Telephone \_\_\_\_\_

Occupation \_\_\_\_\_ Employed by \_\_\_\_\_

## Nontaxable Income Worksheet

12C Schedule—other nontaxable income breakdown/detail. Complete this schedule for item 12C:	2008	Estimated 2009
Payments to tax-deferred pension and savings plans as reported on W-2 form(s). Include amounts withheld from earnings for qualified retirement plans, such as 401(k) and 403(b) plans. Do not report amounts entered in 10A or 10B.	\$ _____	\$ _____
Pretax contributions or employer-provided untaxed income from fringe benefit plans ( <i>cafeteria or 125 plans</i> ).	\$ _____	\$ _____
Cash support, gifts, or money paid on your behalf ( <i>from relatives or nonrelatives</i> ).	\$ _____	\$ _____
Household expenses and any money paid by separated or divorced spouse in lieu of child support.	\$ _____	\$ _____
Housing, food, and other living allowances ( <i>excluding rent subsidies for low-income housing</i> ) paid on your behalf or to you as a member of the military, clergy, or other occupation ( <i>including cash payments and cash value of benefits</i> ), or contributions to your household income provided by other nondependent members.	\$ _____	\$ _____
Earned income credits, welfare benefits, veterans benefits, workers compensation.	\$ _____	\$ _____
Income from tax-exempt investments.	\$ _____	\$ _____
Income earned abroad ( <i>Foreign Income Exclusion, IRS Form 2555, or 2555EZ</i> ).	\$ _____	\$ _____
Other untaxed income and benefits not included above.	\$ _____	\$ _____
<b>Enter these totals in PFS item 12C for 2008 and 2009.</b>	<b>Total</b> \$ _____	\$ _____

- 32 Use this space to explain all circled items with an entry other than zero (0) and any unusual circumstances or expenses. Be as brief as possible. Do not send tax forms, letters, or other materials with your PFS as these materials will be destroyed. Please send any supplementary information directly to the school(s). Schools may be unable to grant financial assistance without a full explanation of circled items.

Worksheet only  
Do not send to SSS

### PART II: PARENTS' CERTIFICATION AND AUTHORIZATION

We declare that the information reported on this form, to the best of our knowledge and belief, is true, correct, and complete. We recognize that intentionally providing false or inaccurate data may impact our ability to receive any financial aid and/or our ability to maintain a contract with a school. We authorize transmittal of this form and the information within it to the schools and organizations named in item 7A and its use by the School and Student Service for Financial Aid (SSS) and its third party service providers. The SSS, its third party service providers, and any of the schools and organizations designated by us in item 7A to receive copies of this information have our permission to verify the information reported and we understand and agree that this verification may include the disclosure of personal and financial information, such as an official copy of our latest income tax return and/or a signed IRS Form 4506. **If you do not agree to the above, please do not submit your PFS.**

Please refer to page 8 of the PFS Instruction booklet regarding how SSS will process your payment.

Parent or  
Guardian in 6A

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Home telephone | | | | | | | | | | Daytime telephone | | | | | | | | | |

Parent or  
Guardian in 6B

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Home telephone | | | | | | | | | | Daytime telephone | | | | | | | | | |



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