



Family Financial Data for the 2020-2021 School Year

Answer the questions for the student’s “Parent,” as determined by the following statements as they applied on **December 31, 2019**: If the student resides at each parent’s house 50% percent of the time, each parent(s) fills out this form for their share of tuition.

IMPORTANT: Please return this form to a member of the Admissions Committee along with a *signed* copy of the parent’s Federal and State income tax return(s), including *all* forms, schedules, and attachments, for the **2019** tax year. **Include all W-2 forms.**

Part I. Household information

<i>If this statement applies...</i>	<i>Then complete this form for...</i>	<i>Filing status</i>
The student’s parents are both living, married to each other, and not separated.	Both parents.	MARRIED
The student’s parents are divorced or separated If the student resides at each parent’s house 50% percent of the time, each parent(s) fills out this form for their share of tuition.	The parent with whom the student lives, if not remarried.	DIVORCED
	The parent with whom the student lives <i>and</i> the person whom the parent remarried.	REMARRIED
The student’s parent is single or widowed.	The parent.	SINGLE
1. Student’s full name(s)	1. _____ 2. _____ 3. _____ 4. _____ 5. _____	
2. Parent Filing Status (from table above).....	Circle One: MARRIED ● DIVORCED ● REMARRIED ● SINGLE	
3. Parent/Guardian’s full name		
4. Parent/Guardian’s full name		
5. If the student is new to the school, indicate the expected or desired starting attendance date. <i>For returning students, write “n/a”</i>		
6. How many people are in the Parent’s household? <i>Include the student and both parents. Also include other persons who are primarily supported (more than half) by the Parent, and who will continue to be supported by the Parent during the period July 1, 2020 through June 30, 2021.</i>		

Part II. Parent financial data, from tax forms for the year 2019

7.	Adjusted gross income for 2019. <i>IRS Form 1040–line 8b</i>		\$
8.	Adjustments – Category “A”		
	a. Earned income credit. <i>From IRS Form 1040–line 18a</i>	\$	
	b. Additional child tax credit. <i>From IRS Form 1040–line 18b</i>	\$	
	c. American Opportunity Credit. <i>From IRS Form 1040–line 18c</i>	\$	
	d. Credit for federal tax on special fuels. <i>From IRS Form 1040 Schedule 3 line 12</i>		
	e. Other Refundable Credits. <i>From IRS Form 1040 Schedule 3, Line 13</i>		
	f. Welfare Benefits including Temporary Assistance for Needy Families (TANF) - CalWORKS in California. Do Not Include Food Stamps or Subsidized Housing.	\$	
	g. Social Security benefits received for <i>all</i> household members that were not taxed (such as SSI).....	\$	
	TOTAL Miscellaneous credits and benefits. <i>Sum of lines a through g above</i>		\$
9.	Adjustments – Category “B”		
	a. Payments to tax-deferred pensions and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, J, and S. Don't include amounts reported in code DD (employer contributions toward employee health benefits).....	\$	
	b. Payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans. <i>From IRS Form 1040 Schedule 1 Line 15</i>	\$	
	c. IRA deductions. <i>From IRS Form 1040 Schedule 1 Line 19</i>	\$	
	d. Child support received for <i>all</i> children in the household. Do NOT include foster care or adoption payments.	\$	
	e. Tax exempt interest income. <i>From IRS Form 1040 line 2a</i>	\$	
	f. Foreign income exclusion. <i>From IRS Form 2555 line 42</i>	\$	
	g. Untaxed portions of IRA distributions and pensions. <i>From IRS Form 1040 line 4a minus line 4b. Exclude rollovers. If negative, enter zero here</i>	\$	
	h. Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).....	\$	
	i. Veterans' non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances....	\$	
	j. Any other untaxed income or benefits not reported elsewhere, such as worker's compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, etc. Do NOT include student aid, Workforce Investment Act educational benefits, or benefits from flexible spending arrangements (such as cafeteria plans)	\$	
	k. Money and other support received by you or paid on your behalf during 2019 that is not reported elsewhere on this form. For example, if rent or other living expenses were paid by someone else in your household or a renter whose income is not included on this form, then report here the value of such support. If the value is not known, use your best estimate. Also include cash and the value of other support received from or paid by the student's grandparents, relatives, and others. Also include scholarships and awards.....	\$	
	TOTAL Adjustments. <i>Sum of lines a through k above</i>	\$	

Adjustments – Category “C”			
10.	a. Child support paid by Parent in 2019 because of divorce or separation. Do NOT include support for children in Parent’s household (Question 6 above).		
	TOTAL Adjustments. <i>Line a.</i>	\$	\$
Allowances			
11.	a. Enter the total amount of the Parent’s Federal income tax for 2019. <i>From IRS Form 1040 line 16</i>		
	b. Enter the total amount of the Parent’s State Income for 2019 <i>From California State Form 540 line 64.</i>		
	c. Enter the total amount of Social Security tax for 2019 <i>From W2 Form Box 4 from all W2s.</i>		
	d. Enter the total amount of Medicare tax for 2019 <i>From W2 Form Box 6 from all W2s</i>		
	e. Enter the total amount of SDI Tax for 2019 <i>From W2 Form Box 14 code SDI from all W2s.</i>		
	TOTAL Allowances. <i>Sum of lines a through e.</i>	\$	\$
	Amount of student’s 2020-2021 tuition to be paid by student’s grandparents or other family members or other sources of support.		\$
12.			\$

Part III. Supplementary Information

Please use the space below to describe any recent or upcoming changes or unusual circumstances that might affect your ability (positively or negatively) to pay for school. For example, mention such things as loss of employment, job change, raise in income, medical condition, income or assistance that are not reported above, and so on.

Part IV. Parent declaration and signatures

I declare that the information provided on this form and all attachments is correct and complete to the best of my knowledge and belief. I agree, if asked, to provide information that will verify the accuracy of the information provided on this form.

Signature of parent/guardian _____
Date

Signature of parent/guardian _____
Date