

Business/Farm Supplement

School Year 2016-2017

Student's Information
Student's Name:
Student's ID Number:
Business Information
1. Name of Business/Farm:
2 Van Business/Farm was established.
2. Year Business/Farm was established:
3. Address of Business/Farm
3. Address of Business/Faith
Street Address
Street Address
L City, State and Zip Code
4. Type of Business:
☐ Sole Proprietorship (Attach 1040 schedule C/F)
☐ Partnership (Attach form 1065)
☐ C-Corporation (Attach form 1120)
☐ S-Corporation (Attach form 1120S)
5. Describe the principal product or service of the business/farm
6. What is your percentage of ownership? (Attach schedule k-1)
%

8. Number of employees in this business/farm: 9. Farm Owners: Do you live on the farm? 10. Business Owners: Is the business a part of your home? 11. Have you sold a portion of your business/farm? 11. Have you sold a portion of your business/farm? 12. Does this business own any real estate and/or land? 13. Yes 14. No 15. Does this business own any real estate and/or land? 16. Yes 17. No 18. No land land land land land land land land	Name	Re	ationship		Percentage
D. Farm Owners: Do you live on the farm? Yes No No No No Susiness Owners: Is the business a part of your home? Yes No f yes, what percentage of your home is claimed for business use? % Detailed Business/Farm 11. Have you sold a portion of your business/farm? Yes No No 12. Does this business own any real estate and/or land? Yes No Count only property owned by this business. Property owned personally should not be linere)			·		
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	•	Year Aquired	Purchase Price	Current Value	Current Deb

13. What is TOTAL FAIR MARKET VALUE of this business/farm as of toda total fair market value of the ENTIRE BUSINESS, including your interest ar OTHER STAKEHOLDERS.) \$	• ,
14. What is the TOTAL OUTSTANDING DEBT of this business/farm as of the total outstanding debt of the ENTIRE BUSINESS, including your portion portions of debt held by ALL OTHER STAKEHOLDERS.) \$	• •
15. What is the NET WORTH of this business? (Net Worth = Total Fair Material Outstanding Debt) Please indicate the total net worth of the ENTIRE your portion of the net worth and the portions of the net worth held by ASTAKEHOLDERS) \$ \\$	BUSINESS, including
Additional Information or Special Circumstances	
16. Please provide any other information that you feel will assist the HI in more accurately understanding the financial condition of this business.	
Signatures	
Jignatures	
Father/Step-Father	Date
Mother/Step-Mother	Date