



The Educational Opportunity Fund Program
2019-2020 Supporting Documents

Business Income Form

Student's Name: _____

855#: _____

According to the 2017 taxes submitted, "***Business Income or Loss***" was reported on ***line 12***. Please complete the form below and attach ***Schedule C*** from the 2017 1040s.

▪ **Business Income or Loss (1040 line 12)**

○ \$ _____

▪ **Business Name**

○ _____

▪ **Nature of Business**

○ _____

▪ **Business Address**

○ _____

▪ **Number of Employees (If you do not have any employees please put a zero in the space provided.)**

○ _____

I certify that the information provided above is correct and complete to the best of my (our) knowledge.

Parent Signature: _____

Date: _____



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2019-2020 Supporting Documents

EXAMPLE

Business Income Form

Student's Name: John Doe

855#: 080808

According to the 2017 taxes submitted, "**Business Income or Loss**" was reported on **line 12**. Please complete the form below and attach **Schedule C** from the 201476 1040s.

▪ **Business Income or Loss (1040 line 12)**

○ \$12,000

▪ **Business Name**

○ No business name-independent contractor

▪ **Nature of Business**

○ Cab Driver

EXAMPLE

▪ **Business Address**

○ 300 Pompton Road, Wayne, NJ 07470

▪ **Number of Employees (If you do not have any employees please put a zero in the space provided.)**

○ 0

I certify that the information provided above is correct and complete to the best of my (our) knowledge.

Parent Signature: John Doe Sr.

Date: 9/15/18

EXAMPLE