



The Educational Opportunity Fund Program  
2020-2021 Supporting Documents

## Business Income Form

Student's Name: \_\_\_\_\_

855#: \_\_\_\_\_

*According to the 2018 IRS form 1040 Schedule 1: Additional Income & Adjustments to Income submitted, "**Business Income or Loss**" was reported on **line 12**. Please complete the form below and attach **Schedule C** from the 2018 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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**EXAMPLE**

## Business Income Form

Student's Name: John Doe

855#: 080808

According to the 2018 IRS form 1040 Schedule 1: Additional Income & Adjustments to Income submitted, "Business Income or Loss" was reported on **line 12**. Please complete the form below and attach **Schedule C** from the 2018 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: 9/15/19

**EXAMPLE**