



The Educational Opportunity Fund Program  
2022-2023 Supporting Documents

## Business Income Form

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

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

*According to the 2020 IRS form 1040 Schedule 1: Additional Income & Adjustments to Income submitted, "**Business Income or Loss**" was reported on **line 3**. Please complete the form below and attach **Schedule C** from the 2020 1040s.*

- **Business Income or Loss (1040 line 3, of IRS form 1040 Schedule 1: Additional Income & Adjustments to Income)**

○ \$ \_\_\_\_\_

- **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 2020 IRS form 1040 Schedule 1: Additional Income & Adjustments to Income submitted, "Business Income or Loss" was reported on line 3. Please complete the form below and attach Schedule C from the 2020 1040s.

- **Business Income or Loss (1040 line 3, of IRS form 1040 Schedule 1: Additional Income & Adjustments to Income)**
  - \$12,000
  
- **Business Name**
  - No business name-independent contractor
  
- **Nature of Business**
  - Cab Driver
  
- **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

**EXAMPLE**

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

Parent Signature: John Doe Sr.

**EXAMPLE**

Date: 9/15/20