

# 2023-2024 Parental Asset/Liability Statement for Business or Farm

**Please Return To:** 

Office of Financial Assistance Dropbox https://www1.villanova.edu/villanova/enroll/finaid/forms.html

| Student's Name:                                                                                                                                                                                                                                                                                                                                                                                                                        |                  | Villanova University<br>Student ID Number: |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------|--|--|
| Parent Completing This Form:                                                                                                                                                                                                                                                                                                                                                                                                           | Custodial Parent | Noncustodial Parent                        |  |  |
| For consideration of Villanova University Grant assistance, if a parent (or stepparent) is self-employed, has any interest, share or involvement in a corporation, partnership or in a business or farm, a completed Parental Asset/Liability Statement for Business or Farm is required for each business and/or farm. Attach your 2021 Federal Schedule C, Form 1120, 1120S, or 1065 and <b>copies of all K-1's</b> , if applicable. |                  |                                            |  |  |
| Please answer all questions (if not applicable, indicate N/A or \$0. Do not leave any questions blank, if any section is left blank the form will be considered incomplete and returned to the sender).                                                                                                                                                                                                                                |                  |                                            |  |  |
| If you own more than one business or farm, please make a copy of this form and complete a separate one for each business or farm.                                                                                                                                                                                                                                                                                                      |                  |                                            |  |  |
| Parent(s)'/Stepparent's Business/Farm Information<br>DO NOT LEAVE ANY QUESTIONS BLANK                                                                                                                                                                                                                                                                                                                                                  |                  |                                            |  |  |
| Name of Business/Farm:                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                            |  |  |
| Address of Business/Farm:                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                                            |  |  |
| street addres Type of Business/Farm: Sole Proprietor                                                                                                                                                                                                                                                                                                                                                                                   |                  |                                            |  |  |
| Describe principal product or service:                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                            |  |  |
| Parent(s)'/Stepparent's Percentage of Owners<br>Number of Full-time or Full-time Equivalent<br>Give name(s) of owners & partners, the relati                                                                                                                                                                                                                                                                                           | Employees:       | their percentage of ownership:             |  |  |

## **BUSINESS/FARM ASSETS** – DO NOT LEAVE ANY ITEMS BLANK

List total asset value (reasonable estimate of what each asset is worth & could be sold for) as of the date of completing the FAFSA and CSS Profile. LIST ONLY THE VALUE RELATED TO YOUR PERCENTAGE OF OWNERSHIP.

| Cash and Short-Term Investments                           | \$ |
|-----------------------------------------------------------|----|
| Accounts Receivables                                      | \$ |
| Inventories (Total)                                       | \$ |
| Land – (Current Market Value) List Complete Address:      |    |
|                                                           | \$ |
|                                                           |    |
|                                                           |    |
| Buildings – (Current Market Value) List Complete Address: |    |
|                                                           | \$ |
|                                                           |    |
|                                                           |    |
| Check One: Own Rent                                       |    |
| Machinery/Equipment                                       | \$ |
| Other Assets – MUST LIST EACH ITEM                        |    |
|                                                           | \$ |
|                                                           |    |
|                                                           |    |
| TOTAL ASSETS                                              | \$ |

\*\*Must Complete Additional Information on the Next Page\*\*



Student's Name:

#### Villanova University Student ID Number:

8 Digit Number

### **LIABILITIES/DEBT- DO NOT LEAVE ANY ITEMS BLANK** List total liabilities (debt) as of the date of completing the FAFSA and CSS Profile. **LIST ONLY THE DEBT RELATED TO YOUR PERCENTAGE OF OWNERSHIP.**

| Accounts Payable                                                                                                 | \$ |
|------------------------------------------------------------------------------------------------------------------|----|
| Mortgages On All Land And Building(s) Listed Under Assets<br>List Complete Address Associated With The Mortgage: | \$ |
| Debts On Equipment                                                                                               | \$ |
| Other Current Debts of the Business Or Farm – MUST LIST EACH ITEM:                                               | \$ |
| TOTAL LIABILITIES/DEBT                                                                                           | \$ |

### **Reminder Checklist:**

You must complete a separate Asset/Liability Form for each business and/or farm that you own or in which you have an interest.

You must attach all 2021 Federal K1s and Business Taxes for each business and/or farm that you own or in which you have an interest, if you haven't done so already.

I understand all questions must be complete. If an item does not apply, indicate \$0 or N/A. Incomplete forms will NOT be considered.

| Print Name of the Parent Completing this form: | Date: |
|------------------------------------------------|-------|
|                                                |       |
| Signature of Parent/Stepparent:                | Date: |

**NOTE:** Consideration for Villanova University Grant will not be given if this form is not completed and returned to the Office of Financial Assistance.