

MOEX

**Family Income and Expense Form
2022-2023**Purpose of Form

Generally, the Family Income and Expense Form is requested to provide a more detailed picture of your family's financial strength. This form collects information about income received in 2020 as well as some of the most common expenses that may have been incurred in 2020.

General Instructions

When reporting income, be sure to report all sources of income, whether domestic or foreign, for both you and your parent(s).

Students must report parent'(s) expenses for 2020. Carefully read each item and report monthly expenses where appropriate. Multiply all monthly expenses by 12 to calculate the annual amount. If a monthly expense was not incurred for all 12 months of 2020, provide only the total amount for that particular expense in 2020 and **provide a statement explaining the situation**. For example, if car payments were made for only 6 months instead of 12 because the car was paid off after 6 months, provide a statement to clarify.

If your 2020 expenses exceeded your 2020 reported income, you must provide a written explanation of how you and/or your family were meeting expenses. Forms showing greater total expense than income and received without a written explanation will be considered incomplete. If you wish to provide any additional information regarding your or your family's financial circumstances, please submit it along with this form.

Student Financial Services may request third-party documentation to confirm the values you report on your Family Income and Expense Form. Should you or a parent submit a form with incorrect information, you must also submit third-party documentation to confirm the correct values. Adjustments to a financial aid award as a result of submitting documentation to correct a Family Income and Expense Form are neither guaranteed nor immediate.

Forms received without the appropriate signature(s) or with missing information/pages are considered incomplete and must be resubmitted. **Do not leave any questions blank.** Submitting incomplete forms or documents will delay the evaluation of your financial aid eligibility and the awarding of your financial aid.



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2022-2023

Student's University ID: [] [] [] [] - [] [] [] [] [] or SIS ID: [] [] [] [] [] [] [] []

Student's Full Name: _____
(Legal Name - Print) first middle last

SECTION 1: INCOME AND SUPPORT for calendar year 2020

Table with 3 columns: Report Values for Calendar Year 2020 only, Annual Amounts (Parent(s)), Annual Amounts (Student). Rows include Adjusted Gross Income, tax-deferred pension, alimony, spousal support, retirement distributions, child support, and housing allowances.



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Student's University ID: [] [] [] [] - [] [] [] [] [] or SIS ID: [] [] [] [] [] [] [] []

SECTION 1: INCOME AND SUPPORT for calendar year 2020 (CONTINUED)

Table with 3 columns: Report Values for Calendar Year 2020 only, Annual Amounts (Parent(s)), and Annual Amounts (Student). Rows include Veterans non-education benefits, loans, cash assistance, financial aid, educational benefits, expenses paid by others, other income, and Total Income in 2020.

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 Student's University ID: - or SIS ID:
SECTION 1: INCOME AND SUPPORT for calendar year 2020 (CONTINUED)

Please indicate with a check mark below if any family member in the household received any of these benefits in 2020.		Report total annual amount received by your family in 2020 from each source
SNAP (Supplemental Nutrition Assistance Program)	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
WIC (Women, Infants and Children supplemental program)	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
TANF (Temporary Assistance for Needy Families)	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Medicaid/SSI (Supplemental Security Income)	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Free or reduced-price lunch	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Other benefit (such as subsidized housing) List source(s): _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$

Did you or your family own a home, pay rent, or live rent-free with others in 2020? Please check appropriate box, at right.	Own home	<input type="checkbox"/>	Pay Rent	<input type="checkbox"/>	Live rent-free with others*	<input type="checkbox"/>
*With whom did you or your family live rent-free? _____						

If there are any special circumstances regarding your sources of income and support, please note them here:

(Expenses noted on next page)



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SECTION 2: EXPENSES

Table with 3 columns: Report Values for Calendar Year 2020 only, Monthly, Annual Total. Rows include: Primary housing, Primary housing real estate and/or property tax paid in 2020, Homeowner's/Renter's Insurance paid in 2020, Combined utilities paid, Cell phone bill payments, Combined car payments for all vehicles, Auto insurance paid in 2020 for all vehicles, Other insurance payments not noted above, Transportation costs, Food and grocery expenses, Medical expenses paid out of pocket, Child/dependent care expenses, Household/personal expenses, Entertainment/leisure/membership expenses, Consumer debt payments, Education expenses paid out of pocket, Other monthly expenses not listed above, Total Expenses in 2020 (MUST include values from previous page).

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 Student's University ID: - or SIS ID:

<p><i>Did your parent's 2020 expenses exceed 2020 income?</i> If YES, please attach a signed statement with any relevant details, including how you and your parents were able to meet your 2020 expenses. In addition to explaining how you or your parents were meeting 2020 expenses, you may provide any additional information concerning your family's income and/or expenses that you wish to share with us. If you or your parents used a loan or credit card(s) to meet your expenses, you must also submit a copy of the loan promissory note or credit card statement(s) to verify this.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p style="text-align: center;">Statement is REQUIRED. Please attach signed statement to this form.</p>		

If there are any special circumstances regarding your expenses, please note them here:

CERTIFICATION STATEMENT: I certify that all the information reported to qualify for federal aid is complete and correct to my knowledge. If additional documentation is required, I will submit those documents in a timely manner. I understand that if I purposely give false or misleading information, I may face legal consequences and my financial aid may be terminated. The student and one parent whose information was reported on the FAFSA must sign and date this form.

STUDENT SIGNATURE _____ Date _____

PARENT SIGNATURE _____ Date _____