



50% Support Test Form

Student Name _____ ID _____

The following form may be used to determine whether a person provides more than half of the support for another person.

Funds belonging to the Person You Supported

- 1. Total funds belonging to the person you supported, including income received (taxable and nontaxable) and amounts borrowed during the year, plus the amount in savings and other accounts at the beginning of the year. \$ _____
- 2. Amount used for support \$ _____
- 3. Amount used for other purposes \$ _____
- 4. Amount in saving and other accounts at the end of the year (The total of lines 2, 3, and 4 should equal line 1.) \$ _____

Expenses for the Entire Household (where the person you supported lived)

- 5. Lodging for entire year (Complete item a or b)
 - a. Rent paid \$ _____
 - b. If not rented, show fair rental value of home. If the person you supported owned the home, include this amount in line 19. \$ _____
- 6. Food \$ _____
- 7. Utilities (heat, light, water, etc. not included in line 5a or 5b) \$ _____
- 8. Repairs (not included in line 5a or 5b) \$ _____
- 9. Other. Do not include expenses of maintaining home, such as Mortgage interest, real estate taxes, and insurance. \$ _____
- 10. Total household expenses (Add lines 5 through 9) \$ _____
- 11. Total number of persons who lived in household \$ _____

Expenses for the Person You Supported

- 12. Each person's part of household expenses (line 10 divided by line 11) \$ _____
- 13. Clothing \$ _____
- 14. Education \$ _____



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- 15. Medical, dental \$ _____
- 16. Travel, recreation \$ _____
- 17. Other (specify) \$ _____
- 18. Total cost of support for the year (Add line 12 through 17) \$ _____

Did You Provide More Than Half?

- 19. Amount the person provided for own support (line 2, plus line 5b if the person you supported owned the home) \$ _____
- 20. Amount others provided for the person's support. Include amounts provided by state, local, and other welfare societies or agencies. Do not include any amount include on line 1. \$ _____
- 21. Amount you provided for the person's support (line 18 minus lines 19 & 20) \$ _____
- 22. 50% of line 18 \$ _____

Is line 21 more than line?

Yes. You meet the support test for the person.

No. You do not meet the support test for the person

By signing this form, you agree to provide information that will verify the accuracy of your information, if requested. If you purposely give false or misleading information, you will be referred to the United States Department of Education's Inspector General. If you purposely give false or misleading information in order to qualify for Title IV funds, you may be fined, sent to prison or both.

Student Signature

Date: _____