Dear Student:

On your FAFSA that you submitted to Ranger College, you answered the question:

Do you have children who will receive more than half of their support from you between July 1, 2023 and June 30, 2024?

Please complete the following worksheet and return it to our office as soon as possible.

WARNING: You must fill out this form accurately. The information that you supply can be verified by your college, your state, or by the U.S. Department of Education.

You may be asked to provide U.S. income tax returns, the worksheets in this booklet and other information. If you can't or don't provide these records to your college, you may not get Federal student aid. If you get Federal student aid based on incorrect information, you will have to pay it back; you may also have to pay fines and fees. If you purposely give false or misleading information on your application, you may be fined \$20,000, sent to prison, or both.

Please return the above questionnaire to the Ranger College Financial Aid of

- 1. Will the child be living with you more than 6 months during the time period of July 1, 2023 and June 30, 2024? Yes \_\_\_\_\_ No \_\_\_\_\_
- 2. If no, who will the child live with?
- 3. Will you be claiming the child on your 2022 tax return?

\_\_\_\_\_

YES \_\_\_\_\_ NO \_\_\_\_\_

- 4. If no, who will claim the child?
- 5. What expenses of the child are you paying? (rent, insurance, clothing)

Please complete the next page to verify expenses

## Worksheet for Determining Support

Please complete the information below for the time period of July 1, 2022 and June 30, 2023

	Funds Belonging to the Person You Supported		
	Enter the total funds belonging to the person you supported, including		
1.	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	1.	
_	Enter the amount on line 1 that was used for the person's support	2.	
3.	Enter the amount on line 1 that was used for other purposes	3.	
4.	Enter the total amount in the person's savings and other accounts at the		
	end of the year	4.	
-	Add lines 2 through 4. (This amount should equal line 1.)	5.	
	Expenses for Entire Household (where the person you supported lived)		
6.	Lodging (complete line 6a or 6b):		
	6a. Enter the total rent paid	6a.	
	6b. Enter the fair rental value of the home. If the person you supported		
	owned the home, also include this amount in line 21.		
		6b.	
7.	Enter the total food expenses	7.	
8.	Enter the total amount of utilities (heat, light, water, etc. not included in line 6a or 6b)	8.	
9.	Enter the total amount of repairs (not included in line 6a or 6b)	9.	
10.	Enter the total of other expenses. Do not include expenses of maintaining		
	the home, such as mortgage interest, real estate taxes, and insurance.	10.	
11.	Add lines 6a through 10. These are the total household expenses	11.	
12.	Enter total number of persons who lived in the household	12.	
	Expenses for the Person You Supported		
13.	Divide line 11 by line 12. This is the person's share of the household		
13.	expenses	13.	
14.	Enter the person's total clothing expenses	14.	
15.	Enter the person's total education expenses	15.	
16.	Enter the person's total medical and dental expenses not paid for or		
	reimbursed by insurance	16.	
17.	Enter the person's total travel and recreation expenses	17.	
18.	Enter the total of the person's other expenses	18.	

Add lines 13 through 18. This is the total cost of the person's sup year	pport for the 19.	

Did the Person Provide More Than Half of His or Her Own Support?		
	20.	
Multiply line 19 by 50% (.50)		
Enter the amount from line 2, plus the amount from line 6b if the person you		
supported owned the home. This is the amount the person provided for his or her own suppor	+ 21	
	ιΖΙ.	
Is line 21 more than line 20?		
No. You must the support test for this person to be your qualifying shild. If t	hio	
<b>No.</b> You meet the support test for this person to be your qualifying child. If the person also meets the other tests to be a qualifying child, stop here; do not	115	
complete lines 23-26. Otherwise, go to line 23 and fill out the rest of the		
worksheet to determine if this person is your qualifying relative.		
Yes. You do not meet the support test for this person to be either your quality	fvina	
child or your qualifying relative. <b>Stop here.</b>	', ''g	
Did You Provide More Than Half?		
Enter the amount others provided for the person's support. Include amounts		
provided by state, local, and other welfare societies or agencies. Do not		
include any amounts included on line 1.	23.	
Add lines 21 and 23	24.	
Subtract line 24 from line 19. This is the amount you provided for the		
person's support	25.	
Is line 25 more than line 20?	-0.	
Yes. You meet the support test for this person to be your qualifying relative.		
<b>No.</b> You do not meet the support test for this person to be your qualifying		
relative. You cannot claim an exemption for this person unless you can do s	0	
under a multiple support agreement or the support test for children of divorc		r 📗
separated parents. See Multiple Support Agreement or Support Test for Ch		
of Divorced or Separated Parents.		