



## 2017-2018 Asset Information Form

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student ID

The Department of Education is requesting additional information to finish processing your financial aid. Please complete the blanks below. If the answer is zero, please enter zero.

	Parent	Student/Spouse
Total Balance of Cash, Savings and Checking*	\$ _____	\$ _____
Net Worth of Investments* (1)	\$ _____	\$ _____
Net Worth of Business* (2)(3)	\$ _____	\$ _____
Net Worth of Investment Farm* (2) <i>(Don't include a farm that you or your parents live on and operate.)</i>	\$ _____	\$ _____

\*Amounts must be based on the values as of the date the FAFSA was completed.

- \* (1) **Investments include** real estate (do not include the house you live in), trust funds, UGMA and UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, installment and land sale contracts (including mortgages held), commodities, etc.  
  
**Investments also include** qualified educational benefits or education savings accounts such as Coverdell savings accounts, 529 college savings plans and the refund value of 529 prepaid tuition plans. For a student who does not report parental information, the accounts owned by the student (and the student's spouse) are reported as student investments. For a student who must report parental information, the accounts are reported as parental investments, including all accounts owned by the student and all accounts owned by the parents for any member of the household. Please do not include retirement plans in investments.
- \* (2) Business and/or investment farm value includes market value of land, buildings, machinery, equipment, inventory, etc. Debt means only those debts for which business or investment farm was used as collateral.
- \* (3) **Is this a small family owned and operated business with less than 100 full-time employees?**  
 Yes \_\_\_\_\_ No \_\_\_\_\_ **If no, the value of the business must be provided above.**

Certification and Signature: Each person signing below certifies that all of the information reported is complete and accurate. If you purposefully give false or misleading information you may be fined, be sentenced to jail, or both.

\_\_\_\_\_  
Student Signature (required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (required if student is dependent)

\_\_\_\_\_  
Date

You may return this form by scanning and emailing it to [fadoc@nwacc.edu](mailto:fadoc@nwacc.edu). Or in person at the Enrollment Support Center or by mail to: NWACC Enrollment Support Center, One College Dr., Bentonville AR 72712