State University of New York

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2026-2027
BUSINESS/FARM SUPPLEMENT

Student's Name:_____ Parent's Name:_____
(If applicable)

FIT ID# @_____ Parent's Email:_____

Check one: □ **Student/Spouse business/farm information** □ **Parent/Stepparent business/farm information**

SECTION I **Type of Business/Farm**
(Please check only the applicable box)

1. □ **Sole Proprietorship (with 100 or less full-time or full-time equivalent employees)**
   Skip Section II, sign and date this form at the bottom
2. □ **Partnership/Corporation (S, LLC): 50% or more owned and controlled (with 100 or less full-time or full-time equivalent employees)**
   Skip Section II, sign and date this form at the bottom
3. □ **Sole Proprietorship (with more than 100 full-time or full-time equivalent employees)**
   Complete Section II
4. □ **Partnership/Corporation (S, LLC): 50% or more owned and controlled (with more than 100 full-time or full-time equivalent employees)**
   Complete Section II
5. □ **Partnership/Corporation (S, LLC): <u>less than 50%</u> owned and controlled**
   Percentage of ownership_____%
   Complete Section II

SECTION II **Description and Value of Business/Farm**
(Only fill out this section if you checked off # 3, 4, or 5 in SECTION I)

Name of Business/Farm _____

Address of Business/Farm _____
Street Address City State Zip Code

PLEASE LIST VALUE AND INDEBTNESS FOR YOUR SHARE OF OWNERSHIP

ASSETS (Current Market Value)	**As of 12/31/2024**	**INDEBTEDNESS**	**As of 12/31/2024**
Real Estate Building(s)/Land:	$_____	Mortgage(s) Outstanding Building(s)/Land:	$_____
Cash:	$_____	Loans:	$_____
Accounts Receivable:	$_____	Accounts Payable:	$_____
Inventories:	$_____	Other: _____	$_____
Equipment/Machinery:	$_____		
Investments:	$_____		
TOTAL ASSETS	**$**_____	**TOTAL INDEBTEDNESS**	**$**_____

By signing this form, I certify that all of the above information is true and complete to the best of my knowledge.

_____ _____
Student's Signature (Typed signatures are not accepted.) **Date**

_____ _____
Parent's Signature ***(If applicable)*** (Typed signatures are not accepted.) **Date**

Documents should be uploaded to the **"Financial Aid Document Upload"** link on the FIT portal **Myfit.fitnyc.edu**. For directions on how to upload documents to this link, go to **fitnyc.edu/fadocsupload**.