



## **Non-custodial Parent Finances**

**For 2019-2020 School Year using 2017 tax information**

This form is used to supplement separate information supplied by the student and custodial parent with the underlying assumption that both parents, regardless of marital status, along with the student, share the primary responsibility for providing a reasonable level of financial support before institutional sources of financial aid are considered.

The non-custodial parent completes this form and submits it directly to College of the Atlantic with the most a **2017** federal tax form by encrypted email, mail or fax. **Information on this form is confidential and not shared with the student or ex-spouse without explicit permission (see checkbox at end). The non-custodial parent will not be contacted by the college or billed unless they have been designated as the billing party.**

The student fills out the Free Application for Federal Student Aid (FAFSA) with the custodial parent as defined in this paragraph. The non-custodial parent (and spouse if remarried) fills out this form. Determination of custodial status: For parents who are divorced, separated or never married and not living together, the custodial parent is the parent you lived with more during the past 12 months. (If you did not live with one parent more than the other, give answers about the parent who provided more financial support during the past 12 months or during the most recent year that you actually received support from a parent.) Custodial status is not necessarily linked to the parent that may claim the student as an exemption for tax purposes.

### **Section 1: Student Information**

Student name First: \_\_\_\_\_ Last: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Student primarily resides ☐ with parent #1 ☐ with parent #2 ☐ equally between parent #1 and parent #2  
☐ without a parent (you must still complete this form)

### **Section 2: Non-custodial Parent and Spouse Information**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relation: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_

Email address: \_\_\_\_\_ Remarried? Yes \_\_\_\_\_ No \_\_\_\_\_

Current Spouse's name: \_\_\_\_\_ Age: \_\_\_\_\_

Occupation: \_\_\_\_\_

### Section 3: Household Information

List household family members – include those living in your house or otherwise away at school.

Full Name	Age	Relationship to student	Name of <u>College or University</u> (if at least ½ time during 2019-2020)	Year in school	Parent contribution	Claimed on parent taxes?	
		Student	College of the Atlantic			Yes	No
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

### Section 4: Financial Information – please attach a copy of the first two pages of 2017 federal taxes and W-2s

#### A. Income

Wages, salaries, tips \_\_\_\_\_

Income earned by non-custodial parent \_\_\_\_\_

\_\_\_\_\_

Income earned by non-custodial parent's spouse

Adjusted Gross Income (AGI) \_\_\_\_\_

Tax paid (don't confuse with taxes withheld; *don't include self-employment tax, it's already factored in AGI*) \_\_\_\_\_

Untaxed benefits, income and credits for 2017

a) Untaxed Social Security benefits \_\_\_\_\_

b) Payments to tax-deferred pensions and savings plans \_\_\_\_\_

c) Deductible amounts for IRA, SEP, SIMPLE or Keough \_\_\_\_\_

d) Child support received for all children \_\_\_\_\_

e) Education credits \_\_\_\_\_

f) Earned Income Credit \_\_\_\_\_

g) Additional child tax credit \_\_\_\_\_

#### B. Assets

a) Cash, savings \_\_\_\_\_

b) Investments \_\_\_\_\_

c) Home\* purchase price \_\_\_\_\_; current market value \_\_\_\_\_; unpaid principal \_\_\_\_\_

d) Other real estate: purchase price \_\_\_\_\_; current market value \_\_\_\_\_; unpaid principal \_\_\_\_\_



**C. Expenses**

- a) Annual child support paid for the tax year \_\_\_\_\_/yr.
- b) Medical expenses not covered by insurance for the tax year \_\_\_\_\_/yr.
- c) Monthly housing payment                      \*I Rent ☐                      Own ☐ \_\_\_\_\_/mo.

**Section 5: Comments** – please use this space to note any extenuating circumstances. Attach supporting documents if relevant.

**Section 6: Signed Declaration**

The information provided on this form is accurate to the best of my knowledge. I agree to update or amend this information if it changes before the start of the school year. I understand that not providing complete and accurate information could result in ineligibility of institutional financial aid.

\_\_\_\_\_  
Signature of non-custodial parent

\_\_\_\_\_  
Date

- ☐ I give permission to share this information with the student if asked
- ☐ I do NOT give permission to share this information with the student