

Student Name	Student ID#		
Parent 1 (Custodial)	Parent 2 (Non-Custodial)		

DIVISION OF INCOME AND ASSETS

You have indicated on your son's/daughter's FAFSA that you have had a change in marital status, yet filed a joint 2023 Federal tax return. Please complete the following form, dividing the income and assets accordingly. In cases of dependent students, the custodial parent should complete and sign this form.

	Reported on 1040, 1040A, or 1040 EZ	Parent 1	Parent 2
Wages, salaries, etc. (line 1)			
Interest income (line 2)			
Dividend income (line 3)			
Taxable IRA/Pensions (line 4 and 5)			
Taxable Social Security Benefits (Line 6b)			
Capital Gains or Losses (Line 7)			
Adjusted Gross Income - AGI (Line 11)			
Taxable refunds of state taxes (Sch 1, line 1)			
Alimony received (Sch 1, line 2)			
Business income (loss) (Sch 1, line 3)			
Other gains or losses (Sch 1, line 4)			
Rental income, royalties, etc. (Sch 1, line 5)			
Farm income (loss) (Sch 1, line 6)			
Unemployment compensation (Sch 1, line 7)			
Other Income (Sch 1, line 9)			
Educator expenses (Sch 1, line 11)			
Certain business expenses of reservists, performing artists, and fee basis government officials (Sch 1, line 12)			

	Reported on 1040, 1040A, or 1040 EZ	Parent 1	Parent 2
Health Savings Account deductions (Sch 1, line 13)			
Moving Expenses (Sch 1, line 14)			
One-half of self employment tax (Sch 1, line 15)			
Self Employed SEP, SIMPLE plans (Sch 1, line 16)			
Self Employed health insurance ded. (Sch 1, line 17)			
Penalty on early withdraw of savings (Sch 1, line 18)			
Alimony paid (Sch 1, line 19)			
IRA deduction (Sch 1, line 20)			
Student Loan Interest deduction (Sch 1, line 21)			
Archer MSA deduction (Sch 1, line 23)			
Other Adjustments (Sch 1, line 25)			
ASSETS			
Cash, savings, checking			
Other Real estate/Investment net worth*			
Business value net worth*			
Farm value net worth*			
Primary Home Equity			
*Net worth is defined as current or m	arket value minus del	ot.	
Please indicate below which parent the did not live with one parent more than during the last 12 months.		• •	
Parent 1 ((as listed above)	Parent 2 (as listed al	pove)
If you have any questions or additional o	comments, feel free to	contact our office or use th	ne space provided below.
Signature of Parent (completing this fo	rm)	 	