

The Financial Statement (Form K) is the biggest form in your application package. Parts of it look like an income tax return. Other parts are included because they are normal in most family law applications. The information you are asked to give in Form K is no different than if you and the respondent lived in the same province, territory, or country.

In your case, the respondent lives in a 'reciprocating jurisdiction'. The court where the respondent lives will make your support order. When you fill out Form K – and all the other forms you need – it is as if you are in court too. Your information is 'under oath', and is evidence. You can help the court by giving it all the information it needs to make a decision.

Who needs to fill out Form K?

To start with, when the Child Support Guidelines are used (and the courts *must* use them), the amount of support is calculated using the income of the person who pays. But, as you know from reading the FormSupport guides which go with the other forms, there are times when a person asks the court for a different kind of order. The short answer is:

If you are (or hope to be) receiving support

If your *only* claim is for child support at the 'table amount', and you filled out Form E, but not any of Forms G, H, J, L, or M, you do not have to fill out Form K at all. But **if you have asked for**

- an amount different than the 'table amount'
- special expenses
- support for yourself
- support for any child over the 'age of majority'
- support for a child in a split or shared custody arrangement
- a non-table amount due to an undue hardship claim
- a non-table amount due to the respondent's high income
- a change to the order you have now,

then you must fill out Form K.

There is another reason for filling out Form K too. If you think the respondent will or might disagree with your application, filling out Form K now will save you a lot of time later. Here's an example:

Nicki makes an application for support for the two children. The Child Support Guidelines table amount will be fine with her, based on Rocky's income, so she doesn't include Form K. Rocky goes to court and claims undue hardship, asking the court to make a non-table support order. The court (in another province) adjourns the case to another day, 6 months away.

The court officials send a notice and request for financial information back to NL, and Nicki then fills out Form K. That information goes back to the reciprocating jurisdiction. In the end, the court made the support order based on the 'table amount', but Nicki and the kids had to wait for many months. She knows that Rocky had the right to make his undue hardship claim, but didn't expect it. She wished she'd included the Financial Statement right from the beginning.

So, if you are making any of the claims marked with the check boxes, you need to fill out Form K. If you are making a plain, simple claim under the Child Support Guidelines, taking the time to fill out Form K now may be in your best interests. This FormSupport guide can tell you when you *must* fill out Form K. For other situations, the choice is up to you.

If you are the person paying support

The tables for the Child Support Guidelines are based on the income of the person who pays support. If you are that person, and you are making any kind of application for an order, you must fill in a Form K.

Form K

FINANCIAL STATEMENT of _____ (name of claimant / applicant)

I am the claimant/applicant in this application to make or vary a support order. My financial circumstances are:

1. My total gross annual income (before tax and other deductions) for this year will be approximately \$ _____

2. My source of income is: (check any that apply, and write details in box below)

- Employment (occupation, name and address of employer, length of employment)
- Self-employment (occupation, name and address of business, length of employment)
- Employment Insurance (last date worked, and date benefits started)
- Social Assistance (Income Support or welfare) (date benefits started)
- Disability insurance (date benefits started, source of payment, reason for disability)
- Other (specify)

Details of income sources checked above:

3. All or part of my income is not subject to income tax (portion exempt, and reason)

PART 1 – SOURCES OF INCOME

Line #		Amount	
1.	Employment income (wages, salary, commissions, overtime, bonuses)		
2.	Other employment income (including tips and gratuities)		
3.	Old age security pension		
4.	Canada or Quebec Pension Plan benefits		
5.	Other pensions or superannuation		
6.	Employment insurance benefits		
7.	Taxable amount of dividends from taxable Canadian corporations		
8.	Interest and other investment income		
9.	Net partnership income	Gross	Net
10.	Rental income		
11.	Taxable capital gains		
12.	Spousal support		
13.	Child support (taxable only)		
14.	Registered Retirement Savings Plan income		
15.	Business income	Gross	Net
16.	Professional income	Gross	Net
17.	Commission income	Gross	Net
18.	Farming income	Gross	Net
19.	Fishing income	Gross	Net
20.	Workers Compensation benefits		
21.	Social Assistance payments		
22.	Net federal supplements		
23.	Other income (specify – see guide)		
24.		(A) TOTAL ANNUAL INCOME	
			\$
25.	Total income in most recent personal income tax return (year: _____)	\$	

ADJUSTMENTS TO INCOME

Line #	Additions	Amount
26.	Actual amount of dividends received from Canadian corporations	
27.	Actual capital gains realized in excess of actual capital losses	
28.	Salaries, benefits, or other payments paid to non-arm's-length persons, and deducted from self-employment income, unless necessary to earn self-employment income	
29.	Allowable capital cost allowance for real property	
30.	Employee stock options with a Canadian-controlled private corporation exercised (<i>Do not include if you dispose of the shares in the same year you exercise the option</i>)	
31.	Value of shares at the time the options are exercised	
32.	Less: Amount paid for the shares	-
33.	Amount paid to acquire the options to purchase the shares	-
34.		=
35.	(B) TOTAL ADDITIONS	\$

Deductions

36.	Union, professional dues, other employment expenses allowed under Child Support Guidelines	
37.	Child support received and included in total income above (line 13)	
38.	Spousal support received from the other parent and included in total income above (line 12)	
39.	Social assistance received by the parent for other members of the household	
40.	Taxable amount of dividends from taxable Canadian corporations	
41.	Taxable capital gains	
42.	Actual amount of business investment losses	
43.	Carrying charges and interest expenses	
44.	Self-employment income, net of reserves, including income for tax purposes in excess of the self-employment income for the 12 months ending on December 31 of the reporting year	
45.	Portion of partnership and sole proprietorship income that is required by the partnership to be re-invested	
46.	(C) TOTAL DEDUCTIONS	\$

PART 2 – CHILD SUPPORT GUIDELINES TABLE AMOUNT CALCULATION

Annual Income for Child Support Guidelines Table Amount

47.	(A) Total Income (<i>from line 24</i>)	
48.	Plus (B) Total Additions (<i>from Line 35</i>)	+
49.	Minus (C) Total Deductions (<i>from line 46</i>)	-
50.	Annual Income for Child Support Guidelines Table Amount	\$

Annual Income for Special or Extraordinary Expenses Amount

51.	Annual Income for Child Support Guidelines Table Amount (<i>from line 50</i>)	
52.	Plus (if applicable) spousal support <i>received</i> from the other parent	+
53.	Minus (if applicable) spousal support <i>paid</i> to the other parent	-
54.	Annual Income for Special or Extraordinary Expenses Amount	→ \$

PART 3 – EXPENSES

My monthly expenses are listed below. These expenses are for me, and the following members of my household:

(if you share an expense with another person, list only the amount that you pay. Convert all expenses to monthly amounts. List actual amounts – if impossible, give estimates, and mark as 'est')

		\$ per Month			\$ per Month
Compulsory Deductions			SUBTOTAL (from line 90)		
55. Income Tax			Adult Household Members		
56. Employment insurance			91. Clothing		
57. Canada Pension Plan			92. Haircare		
58. Employer pension			93. Toiletries, cosmetics		
59. Other (specify)			94. Education fees, supplies		
Household Expenses			95. Entertainment & recreation		
60. Groceries & household supplies			96. Fitness		
61. Meals outside the home			97. Insurance		
62. Furnishings and equipment			98. Charitable donations		
63. Telephone			99. Gifts to others		
64. Cable service			100. Alcohol, tobacco		
65. Laundry & dry cleaning			Children		
66. Newspapers, periodicals			101. Child care (regular expense)		
67. Stationery, computer supplies			102. Babysitting (occasional)		
68. Vacation			103. Clothing		
69. Pet care			104. Haircare		
Housing (primary residence)			105. Allowances		
70. Rent or mortgage			106. School fees & supplies		
71. Taxes			107. Entertainment & recreation		
72. Home insurance			108. Insurance		
73. Heat			109. Gifts (toys, books, etc.)		
74. Electricity			110. Activities, lessons, & supplies		
75. Water			111. Camp		
76. House repairs & maintenance			112. Gifts to other children		
77. Yard maintenance			Savings for the future		
78. Other (specify)			113. RRSP		
Health			114. RESP		
79. Medical Insurance			115. Other		
80. Drugs (after insurance coverage)			116. Debt (other than mortgage)		
81. Dental care (after insurance)			117.		
82. Optical care (after insurance)			118.		
83. Other (specify)			119. Lease payments (specify)		
Transportation			120. Support payments to others (see note under *, below)		
84. Public transit, taxis, etc.			121. Reserve for income taxes		
85. Car operation			122. Other (specify)		
86. Gas and oil			123.		
87. Insurance & licence			124.		
88. Maintenance			125.		
89. Parking			126. TOTAL		
90. SUBTOTAL					

(* Note for line 120. Show support paid to persons **not** included in this application – example: support paid for a child of a past relationship between you and a parent who is not the claimant/applicant in this application. If paid, specify the Name(s) of person(s) supported: _____ . Are payments made

Voluntarily, or due to a Court Order, or written agreement.
Do you deduct payments on your income tax return? Yes No.)

PART 4 – OTHER CHILD SUPPORT AND BENEFITS

Complete this part if you are claiming support for a child over the age of majority, and/or
 you are claiming an amount different than the Child Support Guidelines table amount

A I receive child support for a child(ren) other than the child(ren) in this application:

Name(s) of child(ren)	Annual Amount Received	Taxable (Y / N)

B I receive non-taxable benefits, allowances, or amounts. *(Example: use of a vehicle, childcare, or room and board. If the benefit is not an amount, include an estimate of the annual value of the benefit)*

Benefit received	Annual Amount or Estimate

PART 5 -- HOUSEHOLD INCOME (not including children for whom support is claimed in this application)

Complete this part if you are living with another person **and**
 you are claiming support for yourself, **or**
 your child support application includes an undue hardship claim, **or**
 you believe the respondent may make an undue hardship claim.

A I am living with: *(full name of person or persons – note: your living / marital relationship is not the issue; it is about sharing household responsibilities)*

B A person named in 'A' has a child or children living in the home with us *(name and age of each child)*

C For each person named in 'A', fill in the following information: *(add an extra page if more than 2 people)*

Name of Person #1

- Works at (name of employer, occupation)
- Earns \$ _____ per _____
- Pays for about _____% of household expenses
- Does not work
- Has no earnings
- Contributes no money to the household expenses

Name of Person #2

- Works at (name of employer, occupation)
- Earns \$ _____ per _____
- Pays for about _____% of household expenses
- Does not work
- Has no earnings
- Contributes no money to the household expenses

PART 6 – ASSETS AND DEBTS

A S S E T S

Real Estate	Description of Asset(s) – address, type of property	Your Equity	Market Value
Cars, boats, vehicles	Description of Asset(s) – year, make, model	Your Equity	Market Value
Pension Plan	Trustee/administrator of plan, date of valuation		Value
RRSPs	Financial institution, date of valuation		Value
Financial Assets	Bonds, shares, term deposits, investment certificates, mutual funds – list type, name of financial institution, when purchased		Value
Accounts	Bank or other accounts – type of account, name of financial institution		Value
Business	Name of business, address, nature and extent of ownership or interest		Value of Interest
Life Insurance	Company which issued policy		Cash Value
Debts to me	Description – name of person owing me money, reason for debt, repayment date		Value
Other	Description of other asset(s)		Value
TOTAL VALUE OF ASSETS			\$

D E B T S

Mortgage	Institution / person holding mortgage	Date of last payment	Balance Owing
Credit Cards	Name/Company issuing card, and reason for borrowing	Date of last payment	Balance Owing
Bank / Other	Financial Institution, and reason for borrowing	Date of last payment	Balance Owing
Other Debt	Description of any other debt(s) you owe	Date of last payment	Balance Owing
TOTAL VALUE OF DEBTS			\$

PART 7 – DOCUMENTS ATTACHED TO THIS FINANCIAL STATEMENT

- My personal income tax return for each of the three most recent taxation years, and all documents attached to the returns.
- The income tax notice of assessment, or reassessment, I received for each of the three most recent tax years.

(Check each of the following statements that apply, and attach the listed documents)

- I am an employee. Attached is a statement showing my total gross earnings for this year, to date, including overtime. If this information is not shown on my pay stub, I attach a statement or letter from my employer with that information, including my rate of gross annual pay.
- I am receiving Employment Insurance benefits. My three most recent EIC benefits statements are attached.
- I am receiving Workers Compensation benefits. My three most recent WCB benefits statements are attached.
- I am receiving Social Assistance (Income Support, or welfare). Attached is a statement showing the amount I receive.
- I am self-employed. For the three most recent taxation years, I attach:
 - The financial statements of my business or professional practice, other than a partnership, and
 - A statement showing a breakdown of salaries, wages, management fees, or other payments or benefits paid to, or on behalf of, persons or corporations with whom I do not deal at arm's length
- I am a partner in a partnership. I attach confirmation of my income and draw from, and capital in, the partnership for its three most recent taxation years.
- I control a corporation. I attach
 - the financial statements of the corporation and its subsidiaries, and
 - a statement showing a breakdown of all salaries, wages, management fees, or other payments or benefits paid to, or on behalf of, persons or corporations with which the corporation, and every related corporation, does not deal at arm's length
- I am the beneficiary under a trust. The trust settlement agreement and the trust's three most recent financial statements are attached.

Date this Financial Statement completed: _____.

This document is attached to, and forms part of the evidence in, my support application/support variation application.

Claimant's/Applicant's Signature