

CHILD SUPPORT GUIDELINES WORKSHEETS 1 (Basic), 4 (Number of Children), & 5 (Deviations) (1999)

_____. of Children		MOTHER	COMBINED	FATHER
INCOME:				
1a/b	Last Two Years Schedule C/F income	_____	_____	_____
2a/b	Last Two Years Depreciation claimed	_____	_____	_____
3	MONTHLY S. E. INCOME $((1a+1b+2a+2b)/24)$	_____	_____	_____
4	MONTHLY SALARY INCOME	_____	_____	_____
5	MONTHLY VALUE of Fringe Benefits	_____	_____	_____
6	MONTHLY INCOME ALL SOURCES (sum L3..L5)	_____	_____	_____
DEDUCTIONS:				
7	Filing Status (1=Single;2=HH)	_____	_____	_____
8	No. of Exemptions	_____	_____	_____
9	Annual Gr. Inc $((L1a+1b)/2)+(L4x12)$	_____	_____	_____
10	Standard Ded. (S:\$4300;HH:\$6350)	_____	_____	_____
11	Exemptions (\$2750 each)	_____	_____	_____
12	Fed Taxable Inc. (L9-L10-L11)	_____	_____	_____
13	Annual Fed Income Tax (from table)	_____	_____	_____
14	Child Credit (\$500/ch in custody)	_____	_____	_____
15	Federal Income Taxes $((L13-L14) / 12)$	_____	_____	_____
16	St Taxable Inc (L9-L10)	_____	_____	_____
17	State Tax Before Credits (from table)	_____	_____	_____
18	State Exemption Credit (L8 x \$89)	_____	_____	_____
19	Annual State Income Tax (L17 - L18)	_____	_____	_____
20	State Income Taxes (L19 / 12)	_____	_____	_____
21	FICA/Medicare: 7.65% Sal; 15.3% SE	_____	_____	_____
22	Child(ren)'s Health Insurance Premiums	_____	_____	_____
23	Mandatory Retirement	_____	_____	_____
24	Child Support Previously Ordered for Other Children	_____	_____	_____
25	TOTAL DEDUCTIONS (sum L15 + L20 to L24)	_____	_____	_____
26	MONTHLY NET INC Bef Othr Childrn Dedtn (L6 - L25)	_____	_____	_____
27	Deduction for Children Not Subject of Order	_____	_____	_____
28	MONTHLY NET INCOME (L26-L27)	_____	_____	_____
29	Percentage of Combined Income	_____%	_____%	_____%
MONTHLY SUPPORT, from table		(rounded)	(unrounded)	(rounded)
30	One Child	_____	_____	_____
31	Two Children	_____	_____	_____
32	Three Children	_____	_____	_____
33	Four Children	_____	_____	_____
34	Five Children	_____	_____	_____
35	Six Children	_____	_____	_____
36	GUIDELINE R LIMITATION (rounded down):	_____	_____	_____
DEVIATION (Specify):				
37		+/- _____	+/- _____	
MONTHLY SUPPORT NET OF DEVIATIONS:				
38	One Child	_____	_____	_____
39	Two Children	_____	_____	_____
40	Three Children	_____	_____	_____
41	Four Children	_____	_____	_____
42	Five Children	_____	_____	_____
43	Six Children	_____	_____	_____

FED:	Single:	Head H:	STATE:	Single:	Head H:
15.0%	25,750	34,550	2.51%	2,400	3,800
28.0%	62,450	89,150	3.49%	17,000	24,000
31.0%	130,250	144,400	5.01%	26,500	35,000
36.0%	283,150	283,150	6.68%	excess	excess
39.6%	excess	excess			

APPENDIX "B" Support Worksheet; _____ **v.** _____ ; _____ **County, Case No.** _____