

CHILD SUPPORT SCHEDULE E – DEVIATIONS FROM PRESUMPTIVE AMOUNT

Low-Income Deviation with Self-Support Reserve		
If Noncustodial Parent's Monthly Gross Income (from Worksheet, Line 1) is \$1,850 or Less, Complete This Section to Determine Self-Support Reserve. Otherwise, start with Section 2 below.	(a) Mother	(b) Father
1(a) Enter Monthly Adjusted Gross Incomes (from <i>Child Support Worksheet, Line 2</i>)	\$	\$
1(b) Self-Support Reserve amount	- 900.00	- 900.00
1(c) Income available for support. Subtract Line 1(b) from 1(a) and enter here.	\$	\$
1(d) Enter Presumptive Child Support Amounts (from <i>Worksheet, Line 9</i>)	\$	\$
1(e) Enter Lesser of Lines 1(c) and 1(d) here.	\$	\$
1(f) Enter \$75 in Noncustodial Parent's column only.		
1(g) Compare the amounts for the Noncustodial Parent on Line 1(e) and 1(f) > If the amount on Line 1(e) is greater, enter that amount here. > If the amount on Line 1(f) is greater, enter that amount here.	\$	\$
1(h) > If the Custodial Parent's Gross Monthly Income is \$1,850 or Less, AND the amount on Line 1(c) for the Custodial Parent is less than Line 1(d) for the Custodial Parent, the Noncustodial Parent does not qualify for the Self-Support Reserve Deviation. Enter the Noncustodial Parent's amount from Line 1(d) in the Noncustodial Parent's column here. > Otherwise, if the Custodial Parent's Gross Monthly Income is over \$1,850, OR the amount on Line 1(c) for the Custodial Parent is greater than Line 1(d) for the Custodial Parent, then enter the Noncustodial Parent's amount from Line 1(g) in the Noncustodial Parent's column here.	\$	\$
1(i) Subtract Line 1(h) from Line 1(d) for the Noncustodial Parent . This is the amount of low-income deviation that may be allowed by the Court or jury.	\$	\$

Circumstances Supporting Other Deviations & Monthly Amounts	(a) Mother	(b) Father	(c) Total
Check the applicable reasons for Deviation, and provide monthly amounts or other information as required below.			
<input type="checkbox"/> 2(a) High Income - Combined Adjusted Income for Parents Over \$30,000/Month (<i>Line 2 on CS Worksheet</i>)			\$
<input type="checkbox"/> 2(b) Deviation based on High Income	\$	\$	
<input type="checkbox"/> (3) Vision or Dental Insurance Cost	\$	\$	
<input type="checkbox"/> (4) Life Insurance Premium on Parent's Life for Benefit of Child	\$	\$	
<input type="checkbox"/> (5) Child & Dependent Care Tax Credit Received by a Parent	\$	\$	
<input type="checkbox"/> (6) Travel Expenses for Visitation	\$	\$	
<input type="checkbox"/> (7) Alimony Paid by a Parent	\$	\$	
<input type="checkbox"/> (8) Mortgage Paid / Home Provided for Child and Custodial Parent	\$	\$	
<input type="checkbox"/> (9) Permanency Plan or Foster Care Plan (Child in DHR Custody)	\$	\$	
<input type="checkbox"/> (10) Other _____	\$	\$	
(11) Enter on this line the Deviation, with "+" for increase or "-" for decrease, recommended based on the amounts entered above.	\$	\$	

SCHEDULE E - Deviation for Special Circumstances <i>(Continued)</i>	(a) Mother	(b) Father	(c) Total
☐ 12(a) Extraordinary Educational Expenses (Line 9 of Supp. Tables)			\$
☐ 12(b) Extraordinary Medical Expenses (Line 14 of Supp. Tables)			\$
☐ 12(c) Special Child Rearing Expenses (Line 22 of Supp. Tables)			\$
12(d) Total Extraordinary & Special Expenses [Add Lines 12 (a) - (c)]			\$
12(e) Parents' Pro Rata Shares of Income (<i>Line 3 of CS Worksheet</i>)	%	%	
12(f) Multiply Line 12(d) by percentages on Line 12(e) and enter results here. This is the Deviation amount for Extraordinary and Special Expenses.	\$	\$	
(13) Parenting Time Deviation – for Extended Parenting Time > Enter the amount in Noncustodial Parent's column only, with "+" for increase or "-" for decrease. Maximum Deviation amount is Noncustodial Parent's share of the Basic Child Support Obligation (<i>Line 5 of Child Support Worksheet</i>). > If no Parenting Time Deviation applies, enter zero here.	\$	\$	
(14) Total Allowable Deviations Add or subtract the allowable deviations on Lines 1(i), 11, 12(f) and 13 together, if any apply. Enter the total here and on <i>Child Support Worksheet, Line 10</i> . (The total may be a positive or negative number.)	\$	\$	
These Questions Must Be Answered in All Cases			
B. Would the presumptive amount be unjust or inappropriate? Explain. 			
C. Would deviation serve the best interests of the children for whom support is being determined? Explain. 			
D. Would deviation seriously impair the ability of the custodial parent or nonparent caretaker to maintain minimally adequate housing, food and clothing for the children being supported by the order and to provide other basic necessities? Explain. 			

Names of Parties: _____ vs. _____

Submitted by: _____

Case # _____

Supplemental Tables for Schedule E – Deviation for Special Circumstances

1. Children's Names →						
Extraordinary Educational Expenses	Paid by					Totals
2. Total Yearly Amount Paid for Tuition, Room & Board, Fees, and Books	Mother	\$	\$	\$	\$	
3. Total Yearly Amount Paid for other extraordinary educational expenses	Mother	\$	\$	\$	\$	
4. Total Yearly Amount Paid for Tuition, Room & Board, Fees, and Books	Father	\$	\$	\$	\$	
5. Total Yearly Amount Paid for other extraordinary educational expenses	Father	\$	\$	\$	\$	
6. Total Yearly Amount Paid for Tuition, Room & Board, Fees, and Books	Nonparent Custodian	\$	\$	\$	\$	
7. Total Yearly Amount Paid for other extraordinary educational expenses	Nonparent Custodian	\$	\$	\$	\$	
8. Total Yearly Amounts (Add Lines 2 - 7)		\$	\$	\$	\$	
9. Monthly Average (Divide Line 8 by 12)		\$	\$	\$	\$	
Extraordinary Medical Expenses	Paid by					Totals
10. Total Yearly Amount Paid	Mother	\$	\$	\$	\$	
11. Total Yearly Amount Paid	Father	\$	\$	\$	\$	
12. Total Yearly Amount Paid	Nonparent Custodian	\$	\$	\$	\$	
13. Total Yearly Amounts (Add Lines 10-12)						
14. Monthly Average (Divide Line 13 by 12)		\$	\$	\$	\$	
Monthly Special Expenses	Paid by					Totals
15. Total Yearly Amount Paid for _____	Mother	\$	\$	\$	\$	
16. Total Yearly Amount Paid for _____	Father	\$	\$	\$	\$	
17. Total Yearly Amount Paid for _____	Nonparent Custodian	\$	\$	\$	\$	
18. Total Yearly Amounts (Add Lines 15-17)		\$	\$	\$	\$	
19. Monthly Average (Divide Line 18 by 12)		\$	\$	\$	\$	
20. Enter Basic Child Support Obligation (From Line 4 of Child Support Worksheet)					\$	
21. Multiply amount on Line 20 by 7% (0.07)					\$	
22. If Total on Line 19 is greater than Line 21, subtract Line 21 from Line 19, and enter result here. If Total on Line 19 is less than Line 21, enter zero here.					\$	