

# Worksheet A (WS-A): Income / Deductions / Etc., Parts 1 & 2

Cause / Case # [ ] Calculation includes which worksheet(s)? ☐ A only ☐ A & B

Mother's name [ ] Father's name [ ]

Each child (CH) of calculation: CH01 CH02 CH03 CH04 CH05 CH06 CH07 CH08  
 Each child's BIRTH YEAR: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

If more children, list here each one's number &amp; birth year (e.g., CH09, 2025): [ ]

➔ **ANNUALIZE** all entries unless otherwise instructed, & **ROUND** all cents to dollars: If \$0.49 or less, round down; if \$0.50 or more, round up.

## WS-A, PART 1

### INCOME

	M: Mother	C: Child(ren)	F: Father	Totals (by parent)
1a Wages, salaries, commissions.	M: [ ]		F: [ ]	
1b Self-employment net earnings.	M: [ ]		F: [ ]	
1c Pensions, Social Security, etc.	M: [ ]		F: [ ]	
1d Unearned income.	M: [ ]		F: [ ]	
1e Imputed income.	M: [ ]		F: [ ]	
1f Earned Income Tax Credit (EITC).	M: [ ]		F: [ ]	
1g Other taxable income (specify): [ ]	M: [ ]		F: [ ]	
1h Other non-taxable income (specify): [ ]	M: [ ]		F: [ ]	
1i Total income (add lines 1a–1h).				M: [ ] F: [ ]

### DEDUCTIONS

2a Ordered child support for other children.	M: [ ]		F: [ ]	
2b Allowance for other children from policy <a href="#">404.2</a> table 2.	M: [ ]		F: [ ]	
2c Ordered alimony/spousal support.	M: [ ]		F: [ ]	
2d Ordered health insurance premium for other children.	M: [ ]		F: [ ]	
2e Federal income tax.	M: [ ]		F: [ ]	
2f State income tax.	M: [ ]		F: [ ]	
2g Social Security (FICA plus Medicare).	M: [ ]		F: [ ]	
2h Mandatory retirement contributions.	M: [ ]		F: [ ]	
2i Required employment expense.	M: [ ]		F: [ ]	
2j Dependent care for other children, less dependent care tax credit.	M: [ ]		F: [ ]	
2k Other (specify): [ ]	M: [ ]		F: [ ]	
2l Total allowable deductions (add lines 2a–2k).				M: [ ] F: [ ]
3 Income after deductions (line 1i minus 2l).				M: [ ] F: [ ]

### PERCENTAGES & PRIMARY ALLOWANCES

4 Personal allowance from policy <a href="#">404.2</a> table 1.	M: [ ]		F: [ ]	
5 Income available for child support (line 3 minus line 4; if < 0, enter 0).	M: [ ]		F: [ ]	
6 If line 5 = 0, enter minimum contribution from WS-C; if line 5 > 0, multiply line 3 by 12% (.12) and enter here.	M: [ ]		F: [ ]	
7 Compare each parent's lines 5 & 6; enter higher number.	M: [ ]		F: [ ]	
8 Combined income available (add both columns, line 7).		C: [ ]		M: [ ] F: [ ]
9 Parental share of combined income (line 7 ÷ line 8).				M: [ ] F: [ ]
10 Number of children listed above who are due support.		C: [ ]		
11 Primary child support allowance from policy <a href="#">404.2</a> table 2.		C: [ ]		
12 Supplement to primary allowance for children of calculation: Annual expenses of mother + father + any 3rd-party custodian.				
12a Child care cost less dependent care tax credit.		C: [ ]		
12b Child health insurance premium.		C: [ ]		
12c Unreimbursed medical expense (> \$250/child).		C: [ ]		
12d Other (specify): [ ]		C: [ ]		
12e Total supplement (add lines 12a through 12d).		C: [ ]		
13 Total primary allowance & supplement (add lines 11 & 12e).		C: [ ]		

**WS-A, PART 2****SOLA****M: Mother****F: Father****Totals (by parent)**

- 14 For each parent, if line 6 > line 5, skip to line 21 and enter line 6 amount; if line 6 < line 5, go to line 15.
- 15 Parent's share of total (for each column, line 13 x line 9).
- 16 Compare line 15 to line 5; enter lower amount here.
- 17 Income available for SOLA (line 5 minus line 16; if 0, enter 0 & skip to line 21).
- 18 Adjustments to income available for SOLA.
- 18a Long-distance parenting adjustment (WS-D).
- 18b Other (specify): \_\_\_\_\_.
- 19 Adjusted income for SOLA [line 17 minus (18a + 18b)]. [see WS-E?]
- 20 SOLA amount (WS-E).
- 21 Add line 16 and line 20.
- 22 Gross annual child support (for each parent, compare line 21 to line 6, then enter higher amount).
- 23 Credit for expenses paid (enter each parent's line 12 expenses).
- 24 Annual support per parent (line 22 minus line 23; if < 0, enter 0).

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ]

F: [ ]

M: [ ] F: [ ]

**PARENTING DAYS**

See instructions for definition of one "day."

**25 25a (below): Days with mother + with father must equal 365**

- CH01. Days with mother (M): [ ] Days with father (F): [ ]
- CH02. Days with mother (M): [ ] Days with father (F): [ ]
- CH03. Days with mother (M): [ ] Days with father (F): [ ]
- CH04. Days with mother (M): [ ] Days with father (F): [ ]
- CH05. Days with mother (M): [ ] Days with father (F): [ ]
- CH06. Days with mother (M): [ ] Days with father (F): [ ]
- CH07. Days with mother (M): [ ] Days with father (F): [ ]
- CH08. Days with mother (M): [ ] Days with father (F): [ ]

If more children, add each one via cover-page freeform field,  
with each parent's days (d) & support amount (\$). Totals:

**25b (below): Support per child**

- CH01, per yr: M: [ ] F: [ ]
- CH02, per yr: M: [ ] F: [ ]
- CH03, per yr: M: [ ] F: [ ]
- CH04, per yr: M: [ ] F: [ ]
- CH05, per yr: M: [ ] F: [ ]
- CH06, per yr: M: [ ] F: [ ]
- CH07, per yr: M: [ ] F: [ ]
- CH08, per yr: M: [ ] F: [ ]

M: [ ] F: [ ]

**PER-CHILD SUPPORT**

- 26 Do all children on line 10 live primarily with same parent & spend 110 days or less per year with other parent?
- If YES: Divide each ANNUAL amount by 12, enter results in MONTHLY columns, & total each column. Enter NCP's total at line 27.
  - If NO: Fill in WS-B parts 1 & 2, enter results into ANNUAL columns, & total each column. Subtract lower monthly total from higher one; at line 27, enter difference under parent with higher total.

	<b>26a (below): Annual</b>		<b>26b (below): Monthly</b>	
CH01.	M: [ ]	F: [ ]	M: [ ]	F: [ ]
CH02.	M: [ ]	F: [ ]	M: [ ]	F: [ ]
CH03.	M: [ ]	F: [ ]	M: [ ]	F: [ ]
CH04.	M: [ ]	F: [ ]	M: [ ]	F: [ ]
CH05.	M: [ ]	F: [ ]	M: [ ]	F: [ ]
CH06.	M: [ ]	F: [ ]	M: [ ]	F: [ ]
CH07.	M: [ ]	F: [ ]	M: [ ]	F: [ ]
CH08.	M: [ ]	F: [ ]	M: [ ]	F: [ ]

If more children, add each one via cover-page freeform field, with each parent's annual & monthly amounts (e.g., CH09: annual, M=0, F=1,200; monthly, M=0, F=100). Total them all here.

Totals: M: [ ] F: [ ] M: [ ] F: [ ]

**FINAL MONTHLY TRANSFER PAYMENT**

- 27 Amount at right = final monthly transfer payment for child(ren) of this calculation, owed by parent in whose column it is entered.

M: [ ] F: [ ]

**NAME OF PREPARER & DATE PREPARED**

- 28 Name [ ] Date (mm/dd/yy): [ ]