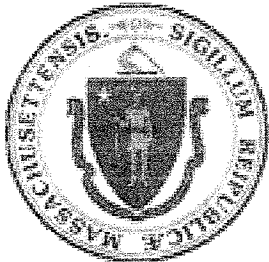


**A SELF-HELP GUIDE TO:**

***Social Security  
Disability Income (SSI)  
and the Child  
Support Guidelines***

- If I receive SSI, do I complete the child support guidelines worksheet differently?
- What if the child's benefit amount is greater than the guidelines amount? Less than the guidelines amount?
- What if I am already paying support and become disabled?



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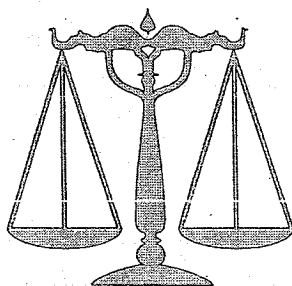
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## **SOCIAL SECURITY DISABILITY INCOME AND THE CHILD SUPPORT GUIDELINES**

**If you receive Social Security Disability Income (SSDI), you will you be completing the Child Support Guidelines Worksheet in a slightly different way. You should refer to a pamphlet called “Guide to Completing the Child Support Guidelines Worksheet” for general instructions and should note the following differences in your case:**

### **GROSS WEEKLY INCOME DETERMINATION**

Gross weekly income is determined in a different manner if you receive SSDI. In order to determine your gross weekly income (section 1(a) of the worksheet), take the monthly amount you receive from SSDI and add to it the monthly amount your child receives as a child’s benefit. Divide this total by 4.3 to determine the weekly amount. For example, if you receive \$500 per month as SSDI benefit and your child receives \$300 per month as a child’s benefit, add these two amounts together and divide by 4.3 as follows:  $\$500 + \$300 = \$800$  divided by 4.3 = \$186.04. This amount is your gross weekly income.

## FINAL CALCULATION OF CHILD SUPPORT

Section 4 of the Child Support Guidelines Worksheet is also treated slightly differently if you receive SSDI. The final line of the worksheet lists a weekly amount of child support which would be ordered under the guidelines. Take this number and multiply by 4.3 to obtain the monthly amount.

If the amount of the child's benefit is equal to or greater than the guidelines amount, the "presumed" child support order under the guidelines will be the child's benefit. You will not have to pay additional child support.

For example, if the calculation on the guidelines worksheet results in an order of \$30.69 per week, multiply this amount by 4.3 to get the monthly amount.  $\$30.69 \times 4.3 = \$131.99$ . If the child receives \$300 per month as a child's benefit, this amount is greater than the guidelines amount. In this situation you will not pay child support in addition to the child's benefit. The child's SSDI benefit is the only child support.

If the amount of the child's benefit is less than the amount of the guidelines, subtract the child's benefit from the guidelines to determine the amount of child support you will pay in addition to the child's SSDI benefit.

For example, if the guidelines amount per month is \$131.99 and the child receives a child's benefit of \$100 per month, subtract \$100 from \$131.99, which equals \$31.99. This is the amount you will pay as child support per month in addition to the child's SSDI benefit, which is sent directly to the child from the Social Security Administration.

**Note: If you are already paying child support and you become disabled you should file a Complaint for Modification as soon as possible. You should file a Complaint for Modification even if the child is receiving the child's benefit from your SSDI. More information about modifications is available in a handout called "Answers to Common Questions Concerning Child Support" which is available on the General Information Board.**



**THIS INFORMATION IS PROVIDED TO YOU AS A PUBLIC SERVICE AND DOES NOT CONSTITUTE LEGAL ADVICE. WHEN YOU SIGN A LEGAL DOCUMENT OR FILE ANY DOCUMENTS WITH THE COURT IT CAN SERIOUSLY AFFECT YOUR FUTURE. YOU SHOULD ALWAYS TRY TO GET LEGAL ADVICE BEFORE SIGNING ANY DOCUMENTS, FILING ANY DOCUMENTS WITH THE COURT OR APPEARING IN COURT.**

David K. Jones

vs.

Susan L. Jones

**Worksheet  
Child Support Guidelines**

Worksheet Completed By David K. Jones

Date Completed 5/1/01

All provisions of the Guidelines (pp. 1-6) should be reviewed prior to the completion of the worksheet. These guidelines will apply (absent a prior agreement acceptable to both parties) in cases where combined gross income of both parties does not exceed \$100,000.00 and where the income of the non-custodial parent does not exceed \$75,000.00.

**1. Basic Order**

a) Non-custodial gross weekly income (less prior support orders actually paid, for child/family other than the family seeking this order)	+ \$500 per month (your benefit)	
	+ \$300 per month (child's benefit)	
	\$800 divided by 4.3 =	
	<u>\$ 186.04</u>	
b) % of gross/number of children (from chart III A)	<u>15</u>	%
c) Basic order (a)x(b)		<u>(A) \$ 27.90</u>

**2. Adjustment For Ages of Children**

a) Age of oldest child	<u>10</u>	years
b) % of increase for age (from chart III B)	<u>10</u>	%
c) Age add on (2b)x(A)	<u>\$ 2.79</u>	
d) Adjusted order (A) + (2c)		<u>(B) \$ 30.69</u>

**3. Custodial Parent Income Adjustment**

a) Custodial parent gross income	<u>\$ 15,000</u>	NOTE: In this example the custodial parent's income does not exceed \$15,000, so this section does not have to be completed.
b) Less \$15,000.00	<u>-15,000.00</u>	
c) Less day care cost (annual)	<u>0</u>	
d) Custodial adjusted gross	<u>\$</u>	
e) Non-custodial gross (annual)	<u>\$</u>	
f) Total available gross 3(d) + 3(e)	<u>\$</u>	
g) Line 3(d) _____ Line 3(f) _____		
h) 3(d) divided by 3(f) _____ per cent		
i) Adjustment for custodial income (Line 3h %) x (B)		<u>(C) \$ 0</u>

**4. Calculation of Final Order**

a) Adjusted order (B) above	<u>(B) \$ 30.69</u>	
b) Less adjustment for income (C) above	<u>(C) - 0</u>	
c) Less 50% of weekly cost to obligor of family group health insurance [under the provisions of section G(1)]	<u>0</u>	
or		
Plus 50% weekly cost of obligee's family group health insurance [under the provisions of section G(1)]	<u>+ 0</u>	\$30.69 x 4.3 =
<b>Weekly Support Order (B) - (C) ± 4(c)</b>		<u>139.99 per month</u>
		<u>\$</u>