Exhibit _____

IN THE CIRCUIT COURT OF _____ , MISSOURI
(County where court is located. City of Saint Louis is considered a county.)

Case Number _____ **Division Number** _____
(Use number from pending case) *(Use number from pending case)*

_____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*
Petitioner,

-and-

_____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*
Respondent.

Parenting Plan

Part A - Custody of the Children

1. Plan Author(s) *(Check all applicable boxes)*
   - ☐ Both parents wrote this *Parenting Plan*.
   - ☐ Petitioner ☐ Respondent wrote this *Parenting Plan*. *(Check Petitioner or Respondent if you choose this option)*
   - ☐ The court wrote this *Parenting Plan*.
   - ☐ The Guardian ad Litem wrote this *Parenting Plan*.
   - ☐ Other _____ _____ _____ _____
     (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*

2. Names and Ages of Children
   Enter the total number of children to whom this *Parenting Plan* applies:_____ .
   The names and ages of the children (hereinafter referred to simply as "the children") are as follows:

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

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_____ _____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

3. Duration of Plan

   The terms and conditions set forth in this *Parenting Plan* shall remain in full force and effect until the children are emancipated or until this plan is modified by a court of competent jurisdiction.

   If you have questions about emancipation or jurisdiction, please consult an attorney or review the definitions on the Representing Yourself website.

Decisions Concerning the Children

4. Types of Decisions

   The three types of decisions that parents must make concerning their children are major decisions, daily or everyday decisions, and emergency decisions.

   A. Major Decisions

      Major decisions are the important decisions about the children. Major decisions are made by **the parent or parents with legal custody**. The following are examples of major decisions:

      - The choice or change of schools, including college or special tutoring,
      - The choice or change of doctor, surgeon or dentist,
      - Church or religious instruction, training or education,
      - Selection of child care (daycare, babysitters, afterschool programs),
      - Major medical care, surgery, or any medical procedure requiring hospitalization or out-patient surgery,
      - Major dental work and orthodontics,
      - Psychological or psychiatric treatment or counseling,
      - The choice or change of camps or other special or extracurricular activities, including sports,
      - The extent of any travel away from home,
      - Part or full-time employment of the children,
      - Whether the child gets a driver's license, drives or purchases a motor vehicle,
      - Birth control and sex education,
      - Actual or potential legal action on behalf of the children.

   B. Daily or Everyday Decisions

      Daily or everyday decisions are routine decisions like minor medical treatment, bedtimes, homework, chores, selection of clothing and normal daily activities.

      Daily decisions shall be made by **the parent having actual physical custody at the time** of the decision. The parents shall work together to create consistent routines for the best interests of the child.

   C. Emergency Decisions affecting Health and Safety

      Emergency decisions are decisions of an urgent nature. They affect the immediate health and safety of the children and have to be made before it is possible to contact the other parent.

      The parent who is with the minor child requiring emergency care may make the emergency decision. The parent making the emergency decision shall advise the other parent of the nature and extent of the emergency as soon as possible.

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5. Access to Medical, Dental and Educational Records of the Children

Unless otherwise provided in this *Parenting Plan*, both parents are entitled to access records and information pertaining to the children, including, but not limited to, full and complete medical, dental, and educational records subject to Part A, Paragraph 21.

6. Legal Custody *(Check one of the three boxes)*

☐ Joint Legal Custody

"Joint legal custody" means that the parents share the decision-making rights, responsibilities, and authority relating to the health, education and welfare of the child, and, unless allocated, apportioned, or decreed, the parents shall confer with one another in the exercise of decision-making rights, responsibilities, and authority. §452.375.1(2), RSMo.

It is in the best interests of the children that the parents have joint legal custody of the children. Major decisions shall be made by both parents together. If they disagree on a major decision they shall resolve their disagreement through the dispute resolution procedure set forth in Paragraph 9.

☐ Sole Legal Custody *(Check Petitioner or Respondent if you choose this option)*

It is in the best interests of the children that ☐ Petitioner ☐ Respondent has sole legal custody of the children. The parent with sole legal custody shall make all major decisions affecting the children. The parents cannot share joint legal custody because:

Missouri Law requires a statement of the reasons for a request for no shared decision-making. You **must** enter a reason on this line.

_____

_____

☐ Third Party - Sole Legal Custody to Third Party

It is in the best interest of the children that

_____ _____ _____ _____

(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*

(hereinafter referred to as "Third Party") has sole legal and sole physical custody of the children. Major decisions affecting the children shall be made by Third Party. Both parents are unfit, unsuitable, or unable to be a custodian of the children or the welfare of the children requires that neither parent have legal custody.

7. Communication between Parents *(Check each box that is appropriate in your case)*

Communication between the parents concerning the children may be by any of the following methods:

☐ In person

☐ Home telephone

☐ Work telephone

☐ Mobile telephone

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☐ Letter via U.S. Postal Service

☐ E-mail

☐ Using the following third person. This third person will be:

_____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*

The children shall not be used as messengers.

8. Issues not to be Discussed in the Presence of the Children

The parents shall not make negative, derogatory or degrading statements about the other parent in front of the children. Both parents shall exercise their best efforts to promote the respect, love and affection of the children toward the other parent. The parents shall avoid discussing parenting issues, financial issues, and other topics related to these proceedings when the children are present.

The parents should prevent other people from making negative, derogatory or degrading statements about the other parent in the presence of the children.

9. Dispute Resolution Procedure

This is the manner in which the parents will resolve disagreements concerning the children. This includes disagreements on the meaning or interpretation of any provision of this plan. The parents shall present their disagreements to a mediator chosen by them for non-binding mediation. In the event that the parents cannot resolve the dispute by mediation, they may submit the issue to the court through appropriate proceedings.

Additional dispute resolution procedures are as follows:

_____

_____

_____

When the Children Will Physically Be with Each Parent

10. Physical Custody *(Check one of the four boxes)*

☐ **Joint Physical Custody** *(Check Petitioner or Respondent if you choose this option)*

"Joint physical custody" means an order awarding each of the parents significant but not necessarily equal, periods of time during which a child resides with or is under the care and supervision of each of the parents. Joint physical custody shall be shared by the parents in such a way as to assure the child of frequent, continuing and meaningful contact with both parents. §452.375.1(3), RSMo.

It is in the best interest of the children that both parents have joint physical custody of the children. Use the address of ☐ Petitioner ☐ Respondent as the address of the children for mailing and educational purposes.

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☐ **Sole Physical Custody with Visitation to the Other Parent** *(Check Petitioner or Respondent if you choose this option)*

It is in the best interests of the children that ☐ Petitioner ☐ Respondent has sole physical custody of the children and that the other parent has visitation as set forth herein.

☐ **Sole Physical Custody and Supervised Visitation to the Other Parent** *(Check Petitioner or Respondent if you choose this option)*

It is in the best interests of the children that ☐ Petitioner ☐ Respondent has sole physical custody of the children and that the other parent has supervised visitation as set forth herein.

Unsupervised visitation with ☐ Petitioner ☐ Respondent would endanger the children's physical health or impair their emotional development because:

_____

Visitation will be supervised by

_____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*

☐ **Physical Custody to a Third Party**

It is in the best interest of the children that

_____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*

(hereinafter referred to as "Third Party") has sole physical custody of the children. Both parents are unfit, unsuitable, or unable to be a custodian of the children or the welfare of the children requires that neither parent have physical custody.

11. Residential Schedules

Each exchange should be written on the Weekend and Weekday Exchange Schedule. The parents shall have physical custody of the children as they agree. In the event they do not agree, then the parents shall exchange the children as set forth in the residential schedules.

Each parent shall consider reasonable changes when requested by the other parent or the children. If a significant change is made, either parent may reduce their agreement to writing. All changes are unenforceable unless in writing and signed by both parents.

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Sample Page - Do Not File

Sample - Weekday and Weekend Exchange Schedule

This page is a sample to help you understand how to fill out the form. Do not file this sample page with the court.

DAY OF WEEK	Enter the parent who is receiving custody and the specified time for each exchange. EXCHANGES FOR DAY
Week One Sunday	Susan
Week One Monday	Susan
Week One Tuesday	Susan
Week One Wednesday	3:30 p.m. Walter picks up children from school
Week One Thursday	8:00 a.m. Walter drops children off at school 3:30 p.m. Susan picks up children from school
Week One Friday	5:30 p.m. Walter picks up children from Susan's house
Week One Saturday	Walter
Week Two Sunday	7:00 p.m. Susan picks up children from Walter's house
Week Two Monday	Susan
Week Two Tuesday	Susan
Week Two Wednesday	3:30 p.m. Walter picks up children from school
Week Two Thursday	8:00 a.m. Walter drops children off at school 3:30 p.m. Susan picks up children from school
Week Two Friday	Susan
Week Two Saturday	Susan

SAMPLE
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Sample Page - Do Not File

Weekday and Weekend Exchange Schedule

DAY OF WEEK	Enter the parent who is receiving custody and the specified time for each exchange. See previous page of this *Parenting Plan* for a sample schedule. EXCHANGES FOR DAY
Week One Sunday	
Week One Monday	
Week One Tuesday	
Week One Wednesday	
Week One Thursday	
Week One Friday	
Week One Saturday	
Week Two Sunday	
Week Two Monday	
Week Two Tuesday	
Week Two Wednesday	
Week Two Thursday	
Week Two Friday	
Week Two Saturday	

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See the following page to determine when each week begins.

Determination of Week One and Week Two

Determination of **week one** or **week two** on the Weekday and Weekend Exchange Schedule

For purposes of this *Parenting Plan*, **week one** is defined as a week that has Sunday on one of the following dates:

January	1	2	3	4	5	6	7	15	16	17	18	19	20	21	29	30	31
February	1	2	3	4	12	13	14	15	16	17	18	26	27	28	29		
March	1	2	3	4	12	13	14	15	16	17	18	26	27	28	29	30	31
April	1	9	10	11	12	13	14	15	23	24	25	26	27	28	29		
May	7	8	9	10	11	12	13	21	22	23	24	25	26	27			
June	4	5	6	7	8	9	10	18	19	20	21	22	23	24			
July	2	3	4	5	6	7	8	16	17	18	19	20	21	22	30	31	
August	1	2	3	4	5	13	14	15	16	17	18	19	27	28	29	30	31
September	1	2	10	11	12	13	14	15	16	24	25	26	27	28	29	30	
October	8	9	10	11	12	13	14	22	23	24	25	26	27	28			
November	5	6	7	8	9	10	11	19	20	21	22	23	24	25			
December	3	4	5	6	7	8	9	17	18	19	20	21	22	23	31		

For purposes of this *Parenting Plan*, **week two** is defined as a week that has Sunday on one of the following dates:

January	8	9	10	11	12	13	14	22	23	24	25	26	27	28			
February	5	6	7	8	9	10	11	19	20	21	22	23	24	25			
March	5	6	7	8	9	10	11	19	20	21	22	23	24	25			
April	2	3	4	5	6	7	8	16	17	18	19	20	21	22	30	31	
May	1	2	3	4	5	6	14	15	16	17	18	19	20	28	29	30	31
June	1	2	3	11	12	13	14	15	16	17	25	26	27	28	29	30	
July	1	9	10	11	12	13	14	15	23	24	25	26	27	28	29		
August	6	7	8	9	10	11	12	20	21	22	23	24	25	26			
September	3	4	5	6	7	8	9	17	18	19	20	21	22	23			
October	1	2	3	4	5	6	7	15	16	17	18	19	20	21	29	30	31
November	1	2	3	4	12	13	14	15	16	17	18	26	27	28	29	30	
December	1	2	10	11	12	13	14	15	16	24	25	26	27	28	29	30	

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12. Holidays

A different schedule can apply on holidays. The times each parent will have with the children during the holidays are set forth on the Holiday Exchange Schedule.

Include the name of the parent who will have the holiday and the times to exchange the children.

Holiday Exchange Schedule

Holiday	Even Numbered Years *List name of parent*	Odd Numbered Years *List name of parent*	Physical Custody From *Time - Include a.m. or p.m*	Physical Custody To *Time - Include a.m. or p.m.*
Martin Luther King Day				
President's Day				
Memorial Day				
Independence Day				
Labor Day				
Thanksgiving				
Halloween				
Christmas Eve				
Christmas Day				
Mother's Day				
Father's Day				
Petitioner's Birthday				
Respondent's Birthday				
Child(ren)'s Birthday(s)				
Other holidays, including school holidays, special occasions (specify)				

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13. Vacation Schedule *(Check one of the two boxes)*

☐ No specific weeks will be set aside for our vacations.

☐ Each parent may designate _____ week(s) each year during which they will have exclusive physical custody of the children and the regular schedules do not apply. However, during this period, the Holiday Schedule still applies. Petitioner shall have first choice of weeks in odd-numbered years. Respondent will have first choice of weeks in even-numbered years. The parent with the first choice of weeks must designate the vacation weeks by March 31 of each year. The parent with the second choice of weeks must designate the weeks by April 15 of each year.

_____

_____

_____

Holidays and vacations do not alter the "Week One" or "Week Two" designation, but they do apply ahead of the regular schedule. If the holiday schedule conflicts with any other schedule, the holiday schedule takes precedence.

Other Provisions Concerning the Children

14. Location of Exchanges *(Check one of the four boxes)*

If a specific location for an exchange is not stated on the schedule, then the exchange shall occur at the following location:

☐ All exchanges shall occur at the children's school or child care provider when school or child care is in session. If, or when, school or child care is not in session, all exchanges shall occur at the locations as follows:

_____

_____

☐ All exchanges shall occur at ☐ Petitioner's ☐ Respondent's residence. *(Check Petitioner or Respondent if you choose this option)*

☐ The parent receiving custody of the children shall pick up the children at the other parent's residence.

☐ Exchanges shall occur at the locations as follows:

_____

_____

15. Transportation

Each parent will pay the expenses associated with his or her own transportation to and from the exchange location unless otherwise indicated in this *Parenting Plan*.

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16. Notification of Change from Residential Schedule

In the event either parent cannot exercise the scheduled time with the children, he or she should tell the other parent as soon as possible, but not later than 24 hours before the start of the scheduled time with the children. If a parent anticipates that he or she may have to cancel at the last minute, he or she should advise the other parent of the possible last minute conflict. If a parent fails to notify the other as set forth above, he or she shall be responsible for the reasonable costs incurred by the other parent.

17. Telephone Contact with Children *(Check one of the two boxes)*

Each parent may contact the children in a reasonable manner when the children are with the other parent.

☐ Neither parent may contact the children at the other parent's residence earlier than _____ a.m. or later than _____ p.m.

☐ There are no restrictions on the time to contact the children.

Each parent shall provide the other parent with the telephone number at which the children may be contacted. Neither parent shall configure their telephone system in such a manner as to "block" or prevent the other parent from calling.

When a parent travels out of town with the children for at least 24 hours, he or she must notify the other parent of the children's destination. He or she must also provide a telephone number where the children can be reached.

18. Children's Activities

The parent who has the children at the time of the activity is responsible for getting the children to their school or extracurricular activities. Each parent shall not schedule activities that occur primarily when the children are with the other parent without the other parent's consent.

19. Relocation

§452.377, RSMo states, "Absent exigent circumstances as determined by a court with jurisdiction, **you as a party to this action are ordered to notify, in writing by certified mail, return receipt requested, and at least sixty days prior to the proposed relocation**, each party to this action of any proposed relocation of the principal residence of the child, including the following information:

(1) The intended new residence, including the specific address and mailing address, if known, and if not known, the city;

(2) The home telephone number of the new residence, if known;

(3) The date of the intended move or proposed relocation;

(4) A brief statement of the specific reasons for the proposed relocation of the child; and

(5) A proposal for a revised schedule of custody or visitation with the child.

(6) The other party's right, if that party is a parent, to file a motion, pursuant to §452.377, RSMo, seeking an order to prevent the relocation and an accompanying affidavit setting forth the specific good-faith factual basis for opposing the relocation within thirty days of receipt of the notice.

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Your obligation to provide this information to each party continues as long as you or any other party by virtue of this order is entitled to custody of a child covered by this order. Your failure to obey the order of this court regarding the proposed relocation may result in further litigation to enforce such order, including contempt of court. In addition, your failure to notify a party of a relocation of the child may be considered in a proceeding to modify custody or visitation with the child. Reasonable costs and attorney fees may be assessed against you if you fail to give the required notice."

The residence of the children may be relocated sixty (60) days after providing notice unless a parent files a motion seeking an order to prevent the relocation within thirty (30) days after receipt of notice. Such motion shall be accompanied by an affidavit setting forth the specific factual bases supporting a prohibition of the relocation.

20. The courts must consider any pattern of domestic violence when it awards custody of the children. *(Check one of the three boxes.)*

Domestic violence is abuse committed against another family or household member. Missouri law requires the court consider issues related to domestic violence before making decisions related to the children.

☐ There has been no pattern of domestic violence between the parents.

☐ There has been a pattern of domestic violence between the parents, with

☐ Petitioner ☐ Respondent committing violent acts against the other parent or another family or household member. *(Check Petitioner or Respondent if you choose this option)*

☐ There has been a pattern of domestic violence between the parents, with both parents committing violent acts against the other parent or another family or household member.

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21. If the court restricts a parent's visitation or custody with a child due to domestic violence, the court may also restrict that parent's access to address information within a child's educational records. *(Check one of the three boxes)*

☐ There has been no domestic violence by either parent.

☐ There has been domestic violence committed by ☐ Petitioner ☐ Respondent against the other parent or one of the children. The educational records of the children **shall not** include the address of the other parent or the children. *(Check Petitioner or Respondent if you choose this option)*

☐ There has been domestic violence committed by ☐ Petitioner ☐ Respondent against the other parent or one of the children. However, the educational records of the children may include the address of the other parent or the children. *(Check Petitioner or Respondent if you choose this option)*

▶ _____ _____
(Petitioner - Sign above) (*Petitioner - Print your name above)*

▶ _____ _____
(Attorney for Petitioner - Sign above) (*Attorney for Petitioner - Print your name above)*

▶ _____ _____
(Respondent - Sign above) (*Respondent - Print your name above)*

▶ _____ _____
(Attorney for Respondent - Sign above) (*Attorney for Respondent - Print your name above)*

▶ _____ _____
(Guardian ad Litem - Sign above) (*Guardian ad Litem - Print your name above)*

(If heard by a Family Court Judge)

_____
(Judge)

_____
(Date)

(If heard by a Family Court Commissioner)
Findings and Recommendations of Commissioner:

_____ _____
(Commissioner) *(Date)*

All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.

_____ _____
(Judge) *(Date)*

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Exhibit _____

IN THE CIRCUIT COURT OF _____ , MISSOURI
(County where court is located. City of Saint Louis is considered a county.)

Case Number _____ **Division Number** _____
(Use number from pending case) *(Use number from pending case)*

_____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*
Petitioner,

-and-

_____ _____ _____ _____
(First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*
Respondent.

Parenting Plan

Part B - Support of the Children

1. Plan Author(s) *(Check all applicable boxes)*
   - ☐ Both parents wrote this *Parenting Plan*.
   - ☐ Petitioner ☐ Respondent wrote this *Parenting Plan*. *(Check Petitioner or Respondent if you choose this option)*
   - ☐ The court wrote this *Parenting Plan*.
   - ☐ The Guardian ad Litem wrote this *Parenting Plan*.
   - ☐ Other _____ _____ _____ _____
     (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)*

2. Names and Ages of Children
   Enter the total number of children to whom this *Parenting Plan* applies: _____ .
   The names and ages of the children (hereinafter referred to simply as "the children") are as follows:

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

   _____ _____ _____ _____ _____
   (First Name) *(Middle Name)* *(Last Name)* *(Jr./Sr./III)* *(Child's Age)*

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(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)

Child Support Calculations

Child Support
Child support is an amount of money paid by one parent to the other parent for the support of the children. In addition to a regular monthly child support payment, other expenses of the children may be divided between the parents as child support.

Form 14
The Form 14 is a form used to calculate a presumed amount of child support. The Form 14 is part of this *Parenting Plan* and is found on Part B, Page 8. The court will usually follow the Form 14, however, if the court finds that the child support calculated pursuant to the Form 14 is unjust or inappropriate, it will set child support at a different amount.

Parents must also determine the division and amount of other expenses of the children such as medical and dental insurance, uncovered medical and dental expenses, childcare, and other extraordinary expenses. These expenses are part of the child support obligations of each parent.

Parents may agree on an amount of child support and the division of expenses. The court does not have to accept this agreement and can set different support amounts. Even if the parents have agreed on an amount of child support, **they must still calculate a Form 14 for the court**.

Missouri law further provides that "An award of joint physical custody does not preclude an award of child support pursuant to Section 452.340 and applicable supreme court rules in determining an amount reasonable or necessary for the support of the child." §452.375.12, RSMo. Child support may be appropriate even if both parties have custody of the children an equal amount of time.

3. Parent to Pay Child Support *(Check one of the two boxes)*

   One parent must be called the "parent paying support" and the other parent must be called the "parent receiving support." This is true even if no child support is going to be paid.

   ☐ Petitioner ☒ Respondent will pay regular monthly child support to

   ☐ Petitioner ☐ Respondent. *(Check Petitioner or Respondent if you choose this option)*

   ☐ No regular monthly child support will be paid by either parent. ☐ Petitioner ☐ Respondent will be referred to as "parent paying support" for purposes of the Form 14 calculation only. The other parent will be referred to as "parent receiving support." *(Check Petitioner or Respondent if you choose this option)*

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Medical and Dental Insurance for the Children

Cost of Medical or Dental Insurance for the Children

The cost of medical or dental insurance for the children is the monthly amount of any premium paid. If the parent's employer deducts the amount of premium from his or her pay, then the cost of medical or dental insurance includes the amount of the premium paid. It does not include the cost of medical or dental insurance for the parent, the parent's spouse, or other children that are not covered by this *Parenting Plan*. The cost of medical or dental insurance for the children is included on Line 6c of the Form 14.

The Form 14 states: "If the amount of the actual health insurance costs for the children who are the subject of this proceeding is not available or cannot be verified, the amount of the health insurance costs attributable to the children who are the subject of this proceeding shall be calculated by dividing the total monthly costs for the policy of health insurance by the total number of persons for whom the costs are paid or to be paid and then multiplying the resulting figure by the number of children insured under the policy who are the subject of this proceeding."

4. Parent Responsible for Medical Insurance *(Check one of the three boxes)*

☐ Neither parent is required to maintain **medical** insurance for the benefit of the children. A health benefit plan is not available at reasonable cost through either parent's employer or union. If the parents receive child support services through the Family Support Division, the parents shall notify the Family Support Division of any changes in employment, whether health insurance is available through their employer, other group plan or the Affordable Care Act, provide the name of the insurance provider when coverage is available, and any other changes in access to health insurance coverage.

☐ Petitioner ☐ Respondent shall maintain and pay the cost of **medical** insurance for the benefit of the children.

5. Parent Responsible for Dental Insurance *(Check one of the three boxes)*

☐ Neither parent is required to maintain **dental** insurance for the benefit of the children. A health benefit plan is not available at reasonable cost through either parent's employer or union. If the parents receive child support services through the Family Support Division, the parents shall notify the Family Support Division of any changes in employment, whether dental insurance is available through their employer, other group plan or the Affordable Care Act, provide the name of the insurance provider when coverage is available, and any other changes in access to health insurance coverage.

☐ Petitioner ☐ Respondent shall maintain and pay the cost of **dental** insurance for the benefit of the children.

6. Medical and Dental Insurance for the Children

You must enter an amount on both lines, even if you enter "0." These amounts should also be entered on line 6c of the Form 14.

The total cost of medical and/or dental insurance paid by Petitioner for the minor children is $ _____ per month.

The total cost of medical and/or dental insurance paid by Respondent for the minor children is $ _____ per month.

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In the event either parent is required to maintain medical or dental insurance, the parent providing the health benefit plan shall provide to the other parent an insurance identification card.

If support rights have been assigned to the state of Missouri or the Family Support Division is providing support enforcement services to either parent, the parent paying support shall notify the Family Support Division regarding the availability of medical insurance coverage through an employer or a group plan, provide the name of the insurance provider when coverage is available, and inform the division of any change in access to such insurance coverage.

Health Expenses Not Covered by Insurance

7. Medical, Dental, Vision, or Psychological Expenses not Covered by Insurance

Any parent who receives a bill for medical, dental, vision or psychological expenses of the children shall submit a copy of that bill to the other parent within 30 days of the receipt of the bill.

(Check one of the three boxes)

☐ The parent ☐ receiving support ☐ paying support will pay all reasonable and necessary medical and dental expenses of the children not covered by insurance. Other parent will reimburse the parent paying expenses for _____ percent of all such expenses that are actually paid by the parent paying expenses and are in excess of $250 per year per child. This does not include the uninsured extraordinary costs set forth in Paragraph 8 below. *§454.603.5(2), RSMo. (Check parent "receiving support" or parent "paying support" if you choose this option)*

Medical and dental expenses are defined by §213(d)(1)(A) of the Internal Revenue Code.

§454.633.3, RSMo provides that if you have checked this first box in Paragraph 7 and you have not provided a percentage, then each parent will be responsible for one-half of all reasonable and necessary medical or dental expenses of the children not covered by insurance except as set forth in Paragraph 8 below.

☐ The parent ☐ receiving support ☐ paying support will be responsible for all reasonable and necessary medical or dental expenses of the children not covered by insurance. The other parent does not have the financial resources to contribute to the payment of medical or dental expenses of the children not covered by insurance. This does not apply to the medical costs listed in Paragraph 8 below. *§454.603.5(2), RSMo. (Check parent "receiving support" or parent "paying support" if you choose this option)*

☐ All reasonable and necessary medical or dental expenses of the children are covered by insurance. *§454.603.5(1), RSMo.*

8. Payment of Uninsured Extraordinary Medical Costs

Extraordinary medical costs are predictable and recurring, such as expenses for dental treatment, orthodontic treatment, asthma treatment and physical therapy. These expenses **may** be included in the Form 14 calculation.

If no extraordinary medical costs are to be included on the Form 14, you may leave this information blank.

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Uncovered Extraordinary Medical Costs to be Paid by Parent Paying Support **included** on the Form 14	Amount of Expense
_____	$ _____ per month
_____	$ _____ per month
_____	$ _____ per month

The total cost of these uncovered extraordinary medical costs of the children is $ _____ per month.

You must include this amount on the Form 14 - Line 6d

Uncovered Extraordinary Medical Costs to be Paid by Parent receiving Support **included** on the Form 14	Amount of Expense
_____	$ _____ per month
_____	$ _____ per month
_____	$ _____ per month

The total cost of these uncovered extraordinary medical costs of the children is $ _____ per month.

You must include this amount on the Form 14 - Line 6d

Child Care Expenses

Child care expenses related to employment are expenses incurred by a parent during periods of time while the parent is working and the children are in his or her physical custody.

9. Work-Related Child Care Costs

The work-related child care expenses of the parent receiving support are $_____ per month.

The work-related child care expenses of the parent paying support are $ _____ per month.

(Check one of the four boxes)

☐ There are no work-related child care costs incurred by the parents.

☐ The work-related child care costs will be included in the child support calculation on the Form 14.

The amount of work-related child care costs for the parent receiving support must be placed on Line 6a(1) of the Form 14.

The amount of work-related child care costs for the parent paying support must be placed on Line 6b of the Form 14.

☐ Each parent will pay their own reasonable work-related child care expenses related to his or her employment. The cost of reasonable work-related child care expenses has **not** been included in the child support calculation on the Form 14. Neither parent will reimburse the other parent for any portion of the child care expenses.

☐ The parent paying support shall reimburse the parent receiving support for _____ percent of all reasonable work-related child care expenses actually paid by the parent receiving support. The work related child care expenses have **not** been included on the Form 14. To be eligible for reimbursement of work-related child care expenses, the parent receiving support must appropriately report expenses to the Internal Revenue Service.

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10. Child Care Expenses Unrelated to Employment

Incidental child care costs not related to employment are to be paid by the parent with physical custody at the time the child care costs are incurred.

Extraordinary Child-Rearing Costs of the Children Including College Costs

Extraordinary Child-Rearing Costs

Extraordinary child-rearing costs may include, but are not limited to, the following expenses:

- Educational expenses for college or post-secondary education,
- Special, private or parochial elementary and secondary schooling expenses,
- Tutoring sessions,
- Camps,
- Lessons,
- Athletic activities,
- Travel and other activities intended to enhance the athletic, social or cultural development of a child.

11. Educational Expenses for College or Post-Secondary Education

As used herein, educational expenses for college or post-secondary education (also referred to as college expenses) include tuition, fees, books, dormitory cost for room and board. It does not include room and board while residing with either parent. This term shall be the actual cost to the child. In the event the child receives a scholarship or other aid which reduces the tuition, fees, books, or dormitory costs for room and board, then the educational expenses for college or post-secondary education does not include the amount of such scholarship or aid. For this purpose, loans to the student shall not be considered 'scholarship or other aid'.

The maximum educational expenses for college or post-secondary education, as defined herein, shall not exceed the cost for tuition, fees, books, and dormitory costs for room and board at the University of Missouri at Columbia, regardless of what institution the child attends.

Responsibility for educational expenses for college or post-secondary education shall not exceed more than eight semesters at a college or university.

Continued Eligibility for Child Support when Child is in College

§452.340.5, RSMo provides that "[t]o remain eligible for such continued parental support, at the beginning of each semester **the child** shall submit to each parent a transcript or similar official document provided by the institution of vocational or higher education which includes the courses the child is enrolled in and has completed for each term, the grades and credits received for each such course, and an official document from the institution listing the courses which the child is enrolled in for the upcoming term and the number of credits for each such course."

The child must carry a minimum number of credit hours each semester.

12. Extraordinary Child-Rearing Costs

Extraordinary child-rearing costs incurred by the parents may be included on the Form 14, or the parents may agree to divide these costs on some percentage basis. The extraordinary child-rearing costs are to be paid as set forth in the next paragraph.

Part B, Page 7, Paragraph 13, of this *Parenting Plan*

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13. Payment of Extraordinary Child-Rearing Costs of the Children

a. Extraordinary Child-Rearing Costs **included** on the Form 14

Extraordinary Child-Rearing Costs Paid by Parent Paying Support **included** on the Form 14	Amount of Expense
_____	$ _____ per month
_____	$ _____ per month
_____	$ _____ per month

The total cost of these extraordinary child-rearing costs of the children is $ _____ per month.

You must include this amount on the Form 14 - Line 6e

Extraordinary Child-Rearing Costs Paid by Parent Receiving Support **included** on the Form 14	Amount of Expense
_____	$ _____ per month
_____	$ _____ per month
_____	$ _____ per month

The total cost of these extraordinary child-rearing costs of the children is $ _____ per month.

You must include this amount on the Form 14 - Line 6e

b. Extraordinary Child-Rearing Costs **not included** on the Form 14

Extraordinary Child-Rearing Costs Paid by Parent Paying Support **not included** on the Form 14	Percentage to be Paid by Parent Receiving Support
_____	_____ %
_____	_____ %
_____	_____ %

Parent receiving support will reimburse the other parent the above percentage amount of each of these extraordinary child-rearing costs of the children so long as those expenses are actually paid by the other parent.

Extraordinary Child-Rearing Costs Paid by Parent Receiving Support **not included** on the Form 14	Percentage to be Paid by Parent Paying Support
_____	_____ %
_____	_____ %
_____	_____ %

Parent paying support will reimburse the other parent the above percentage amount of each of these extraordinary child-rearing costs of the children so long as those expenses are actually paid by the other parent.

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FORM NUMBER 14 CHILD SUPPORT AMOUNT CALCULATION WORKSHEET

☐ Respondent / ☐ Petitioner is the "Parent Paying Support"

Total Number of Children: _____

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CHILD SUPPORT CALCULATIONS	PERSON RECEIVING SUPPORT	PARENT PAYING SUPPORT	COMBINED
1. **MONTHLY GROSS INCOME**			
1a. Monthly court-ordered maintenance being received			
2. **ADJUSTMENTS**			
2a. Other monthly child support pursuant to court or administrative order			
2b. Monthly court-ordered maintenance being paid			
2c. Monthly support obligation for other children			
(1) Number of other children primarily residing in each parent's custody			
(2) Each parent's support obligation from support schedule using the parent's Line 1 monthly gross income			
(3) Monthly child support received under court or administrative order for children included in line 2c(1)			
2c. TOTAL adjustment [Line 2c(2) minus Line 2c(3)]			
3. **ADJUSTED MONTHLY GROSS INCOME** (sum of lines 1 and 1a, minus lines 2a, 2b and 2c)			
4. **PROPORTIONATE SHARE OF COMBINED ADJUSTED MONTHLY GROSS INCOME** (Each parent's line 3 income divided by combined line 3 income)			
5. **BASIC CHILD SUPPORT AMOUNT** (From support chart using combined line 3 income)			

CHILD SUPPORT CALCULATIONS	PERSON RECEIVING SUPPORT	PARENT PAYING SUPPORT	COMBINED
6. **ADDITIONAL CHILD-REARING COSTS OF CHILDREN SUBJECT TO THIS ORDER**			
6a. Child Care Costs of Parent Receiving Support			
(1) Reasonable work-related child care costs of the parent receiving support			
(2) Child Care Tax Credit (**See Form 14 Directions**)			
6a. TOTAL adjusted Child Care Costs [Line 6a(1) minus Line 6a(2)]			
6b. Reasonable work-related child care costs of the parent paying support			
6c. Health insurance costs for the children who are subjects of this proceeding			
6d. Uninsured agreed-upon or court-ordered extraordinary medical costs			
6e. Other agreed-upon or court-ordered extraordinary child-rearing costs			
7. **TOTAL ADDITIONAL CHILD-REARING COSTS** (Enter sum of lines 6a, 6b, 6c, 6d and 6e)			
8. **TOTAL COMBINED CHILD SUPPORT COSTS** (Sum of line 5 and line 7)			
9. **EACH PARENT'S SUPPORT OBLIGATION** (Multiply line 8 by each parent's line 4)			
10. **CREDIT FOR ADDITIONAL CHILD-REARING COSTS** (Line 7 of parent paying support)			
11. **ADJUSTMENT FOR A PORTION OF AMOUNTS EXPENDED BY THE PARENT OBLIGATED TO PAY SUPPORT DURING PERIODS OF OVERNIGHT VISITATION OR CUSTODY** (**See Form 14 Directions**) (Multiply line 5 by _____ %)			
12. **PRESUMED CHILD SUPPORT AMOUNT** (Line 9 minus lines 10 and 11)			

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Amount of Child Support

14. Presumed Monthly Amount of Child Support *(Complete all applicable amounts)*

The court-ordered support amount is set forth in Part B, Paragraph 16.

The presumed child support amount calculated pursuant to Form 14 for six children is: $_____.

The presumed child support amount calculated pursuant to Form 14 for five children is: $_____ .

The presumed child support amount calculated pursuant to Form 14 for four children is: $_____.

The presumed child support amount calculated pursuant to Form 14 for three children is: $_____.

The presumed child support amount calculated pursuant to Form 14 for two children is: $_____.

The presumed child support amount calculated pursuant to Form 14 for one child is: $_____ .

15. Should the court order the presumed monthly amount of child support? *(Check one of the two boxes)*

Court-ordered child support will be set at the time of the court proceeding. The court is not bound by the suggestions of the parents and may set an amount greater or less than the suggested amounts of court-ordered child support set forth in this *Parenting Plan*. If the court approves and adopts this plan, then the support provisions herein will become the order of the court.

☐ Yes. The court-ordered child support is the same as the presumed child support amount. The presumed child support amount as calculated herein is not rebutted as being unjust and inappropriate.

☐ No. The court-ordered child support is different from the presumed child support amount in the Form 14. After consideration of all statutory and other relevant factors pursuant to §452.340.8, RSMo, the presumed child support amount is rebutted as unjust and inappropriate due to

_____

_____ .

16. Court-Ordered Child Support *(Check all applicable boxes)*

This is the amount of child support that actually will be paid by the parent paying support.

You should check each box that applies. For example, if this *Parenting Plan* pertains to three children, then you should check the boxes for three children, two children and one child. You should also enter an amount of support for three children, two children, and one child, respectively. You must attach a Form 14 for each level. For example, if you have three children, then you must attach one Form 14 for three children, one Form 14 for two children, and one Form 14 for one child.

If you check one of the boxes below, you must check all the boxes below it. Once again, if you only check the box for two children and do not check the box for one child, then no support is owed when only one child remains.

☐ Six or More Children - The parent paying support is to pay to the parent receiving support $ _____ per month when the parent receiving support is entitled to support for six or more children covered by this *Parenting Plan*.

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☐ Five Children - The parent paying support is to pay to the parent receiving support $ _____ per month when the parent receiving support is entitled to support for five children covered by this *Parenting Plan*.

☐ Four Children - The parent paying support is to pay to the parent receiving support $ _____ per month when the parent receiving support is entitled to support for four children covered by this *Parenting Plan*.

☐ Three Children - The parent paying support is to pay to the parent receiving support $ _____ per month when the parent receiving support is entitled to support for three children covered by this *Parenting Plan*.

☐ Two Children - The parent paying support is to pay to the parent receiving support $ _____ per month when the parent receiving support is entitled to support for two children covered by this *Parenting Plan*.

☐ One Child - The parent paying support is to pay to the parent receiving support $ _____ per month when the parent receiving support is entitled to support for one child covered by this *Parenting Plan*.

17. Starting Date for Child Support *(Check one of the two boxes if either parent is paying child support in Part B, Paragraph 16)*

Notification by the Parent Receiving Support when Child Support Changes

Missouri law provides that "[u]nless otherwise agreed in writing or expressly provided in the judgment, provisions for the support of the child are terminated by emancipation of the child. The parent entitled to receive child support shall have the duty to notify the parent obligated to pay support of the child's emancipation and failing to do so, the parent entitled to receive child support shall be liable to the parent obligated to pay support for child support paid following emancipation of a minor child, plus interest." §452.370.4, RSMo.

☐ The first child support payment is due on the date of the entry of the judgment.

☐ The first child support payment is due on _____ .

Income Tax Considerations

18. Income Tax Dependents

The Form 14 calculation assumes that the parent receiving support will claim the children as dependents. If the parent paying support is entitled to claim one or more of the children, then the Form 14 guidelines are unjust and inappropriate and the second box in Paragraph 15 should be checked.

The parents shall be entitled to claim the minor children as dependents for income tax purposes as follows:

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Name of Child	In odd numbered tax years, this parent will claim this child as a dependent	In even numbered tax years, this parent will claim this child as a dependent

Parent paying support must be current with all support obligations as of December 31 of the tax year in which the child is to be claimed. Each parent will sign any appropriate documents to allow the other parent to make such claims.

Payment of Child Support and Income Withholding

Income Withholding

Income Withholding means that the child support is taken directly out of the paycheck of the parent paying support. These payments could be taken out of money from an employer, or other types of payments like Social Security disability benefits, unemployment compensation benefits or military retirement benefits. The amount withheld is sent to the Family Support Payment Center. The Family Support Payment Center will then forward the support to the parent receiving support. Child support withheld under an income withholding order cannot be sent directly to the parent receiving support. A record will be kept of all payments. If the parent paying support is currently unemployed or self-employed, income withholding may still be ordered, but it will not take effect until the parent paying support begins receiving regular income.

If income withholding is not ordered, then the child support may be paid directly to the parent receiving support. The parent paying support may also voluntarily send payments to the Family Support Payment Center. If the child support is not paid to the Family Support Payment Center, it is extremely important that each parent keep accurate records of the amount of child support paid. This means that the parent paying support may not receive credit for his or her payments if he or she does not have receipts or cancelled checks. Because of this, it is proper to request a receipt from the parent receiving support.

If parents receive Temporary Assistance For Needy Families (TANF) benefits through the Missouri Family Support Division or receive child support enforcement services through the Missouri Family Support Division, child support **must** be paid through the Family Support Payment Center.

Even if the court does not order income withholding right now, the Family Support Division may issue an income withholding order at a later time if the parent paying support fails to make timely child support payments as ordered.

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19. Method of Payment of Child Support *(Check one of the five boxes if either parent is paying child support in Part B, Paragraph 16)*

☐ Child support shall be paid through income withholding. An application for income withholding for support shall be prepared by the parent receiving support and issued by the circuit clerk upon the effective date of this judgment. Child support is ordered to be paid to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.

☐ Income withholding will not issue because a written agreement has been reached between the parents that provides for an alternative arrangement. Child support shall be paid directly to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.

☐ Income withholding will not issue because there is good cause not to require immediate income withholding for the reason that implementation of an immediate withholding would not be in the best interest of the child and the parent paying support has made timely payments of all previously ordered support. Child support shall be paid directly to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.

☐ Income Withholding will not issue because a written agreement has been reached between the parents that provides for an alternative arrangement. Child support shall be paid directly to the parent receiving support.

☐ Income Withholding will not issue because there is good cause not to require immediate income withholding for the reason that implementation of an immediate withholding would not be in the best interest of the child and the parent paying support has made timely payments of all previously ordered support. Child support shall be paid directly to the parent receiving support.

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20. Additional Provisions Pertaining to Support of the Children:

_____

_____

_____

_____ _____

(Petitioner - Sign above) (*Petitioner - Print your name above)*

_____ _____

(Attorney for Petitioner - Sign above) (*Attorney for Petitioner - Print your name above)*

_____ _____

(Respondent - Sign above) (*Respondent - Print your name above)*

_____ _____

(Attorney for Respondent - Sign above) (*Attorney for Respondent - Print your name above)*

_____ _____

(Guardian ad Litem - Sign above) (*Guardian ad Litem - Print your name above)*

(If heard by a Family Court Judge)

_____

(Judge)

_____

(Date)

(If heard by a Family Court Commissioner)

Findings and Recommendations of Commissioner:

_____ _____

(Commissioner) *(Date)*

All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.

_____ _____

(Judge) *(Date)*

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2024 CHILD SUPPORT GUIDELINE REVIEW
UPDATED SCHEDULE

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
0-1300	**60**	**60**	**60**	**60**	**60**	**60**
1350	**91**	**94**	**94**	**95**	**95**	**95**
1400	**122**	**127**	**128**	**129**	**130**	**130**
1450	**153**	**161**	**162**	**164**	**164**	**165**
1500	**184**	**194**	**196**	**198**	**199**	**200**
1550	**215**	**228**	**230**	**233**	**234**	**235**
1600	**246**	**261**	**264**	**267**	**269**	**270**
1650	**277**	**295**	**298**	**302**	**303**	**305**
1700	**308**	**328**	**332**	**336**	**338**	**340**
1750	**339**	**362**	**366**	**371**	**373**	**375**
1800	367	**395**	**400**	**405**	**408**	**410**
1850	376	**429**	**434**	**440**	**442**	**445**
1900	385	**462**	**468**	**474**	**477**	**480**
1950	394	**496**	**502**	**509**	**512**	**515**
2000	403	**529**	**536**	**543**	**547**	**550**
2050	412	**563**	**570**	**578**	**581**	**585**
2100	421	**596**	**604**	**612**	**616**	**620**
2150	430	**630**	**638**	**647**	**651**	**655**
2200	439	**663**	**672**	**681**	**686**	**690**
2250	448	682	**706**	**716**	**720**	**725**
2300	457	696	**740**	**750**	**755**	**760**
2350	465	709	**774**	**785**	**790**	**795**
2400	474	722	**808**	**819**	**825**	**830**
2450	483	736	**842**	**854**	**859**	**865**
2500	491	749	**876**	**888**	**894**	**900**
2550	500	762	**910**	**923**	**929**	**935**
2600	509	776	938	**957**	**964**	**970**
2650	518	789	954	**992**	**998**	**1005**
2700	526	802	970	**1026**	**1033**	**1040**
2750	535	815	986	**1061**	**1068**	**1075**
2800	544	829	1003	**1095**	**1103**	**1110**
2850	553	842	1019	**1130**	**1137**	**1145**
2900	561	855	1035	1156	**1172**	**1180**
2950	570	869	1051	1174	**1207**	**1215**
3000	579	882	1067	1192	**1242**	**1250**
3050	587	895	1083	1210	**1276**	**1285**
3100	596	908	1099	1228	**1311**	**1320**
3150	605	922	1115	1246	1346	**1355**
3200	614	935	1131	1264	1381	**1390**
3250	622	948	1147	1282	1410	**1425**

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Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
3300	631	962	1163	1300	1430	**1460**
3350	640	975	1180	1318	1449	**1495**
3400	648	988	1196	1336	1469	**1530**
3450	657	1002	1212	1354	1489	**1565**
3500	666	1015	1228	1371	1509	**1600**
3550	675	1028	1244	1389	1528	**1635**
3600	683	1041	1260	1407	1548	**1670**
3650	692	1055	1276	1425	1568	1704
3700	701	1068	1292	1443	1588	1726
3750	710	1081	1308	1461	1607	1747
3800	718	1095	1324	1479	1627	1769
3850	727	1108	1340	1497	1647	1790
3900	736	1121	1357	1515	1667	1812
3950	744	1135	1373	1533	1687	1833
4000	753	1148	1389	1551	1706	1855
4050	762	1161	1405	1569	1726	1876
4100	770	1174	1420	1586	1744	1896
4150	778	1185	1433	1601	1761	1914
4200	786	1197	1446	1616	1777	1932
4250	794	1209	1460	1630	1794	1950
4300	802	1220	1473	1645	1810	1967
4350	810	1232	1486	1660	1826	1985
4400	818	1243	1500	1675	1843	2003
4450	826	1255	1513	1690	1859	2021
4500	834	1267	1527	1705	1876	2039
4550	842	1278	1540	1720	1892	2057
4600	850	1290	1553	1735	1909	2075
4650	858	1302	1567	1750	1925	2093
4700	866	1313	1580	1765	1941	2110
4750	874	1325	1593	1780	1958	2128
4800	883	1338	1609	1797	1977	2149
4850	892	1351	1624	1814	1996	2169
4900	901	1364	1640	1831	2015	2190
4950	909	1377	1655	1849	2034	2210
5000	918	1390	1670	1866	2052	2231
5050	927	1402	1686	1883	2071	2252
5100	935	1415	1701	1900	2090	2272
5150	944	1428	1716	1917	2109	2293
5200	951	1439	1730	1932	2125	2310
5250	959	1451	1743	1947	2142	2328
5300	966	1462	1757	1962	2158	2346
5350	974	1473	1770	1977	2175	2364
5400	981	1484	1783	1992	2191	2382
5450	989	1496	1797	2007	2208	2400
5500	995	1505	1808	2019	2221	2415

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Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
5550	1001	1513	1818	2030	2233	2428
5600	1006	1522	1828	2041	2246	2441
5650	1012	1530	1837	2052	2258	2454
5700	1018	1538	1847	2063	2270	2467
5750	1023	1547	1857	2074	2282	2480
5800	1029	1555	1867	2085	2294	2494
5850	1034	1564	1877	2096	2306	2507
5900	1040	1572	1887	2107	2318	2520
5950	1046	1580	1897	2118	2330	2533
6000	1051	1589	1906	2129	2342	2546
6050	1057	1597	1916	2140	2355	2559
6100	1062	1605	1926	2151	2367	2573
6150	1068	1614	1936	2162	2379	2586
6200	1074	1622	1946	2173	2391	2599
6250	1079	1630	1956	2184	2403	2612
6300	1083	1635	1961	2191	2410	2619
6350	1086	1640	1967	2197	2417	2627
6400	1089	1645	1972	2203	2424	2634
6450	1093	1650	1978	2210	2431	2642
6500	1096	1655	1984	2216	2437	2650
6550	1100	1660	1989	2222	2444	2657
6600	1103	1665	1995	2228	2451	2665
6650	1107	1670	2001	2235	2458	2672
6700	1110	1675	2006	2241	2465	2680
6750	1114	1680	2012	2247	2472	2687
6800	1117	1685	2018	2254	2479	2695
6850	1120	1690	2023	2260	2486	2702
6900	1124	1695	2029	2266	2493	2710
6950	1127	1700	2035	2273	2500	2717
7000	1131	1705	2040	2279	2507	2725
7050	1134	1709	2045	2284	2512	2731
7100	1137	1713	2048	2288	2517	2735
7150	1141	1717	2051	2291	2521	2740
7200	1144	1721	2055	2295	2525	2744
7250	1147	1724	2058	2299	2529	2749
7300	1150	1728	2061	2302	2533	2753
7350	1153	1732	2064	2306	2537	2757
7400	1157	1736	2068	2310	2541	2762
7450	1160	1740	2071	2313	2545	2766
7500	1163	1743	2074	2317	2549	2770
7550	1166	1747	2078	2321	2553	2775
7600	1170	1751	2081	2324	2557	2779
7650	1173	1755	2084	2328	2561	2784
7700	1176	1759	2087	2332	2565	2788
7750	1179	1762	2091	2335	2569	2792

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
7800	1182	1766	2094	2339	2573	2797
7850	1187	1773	2103	2349	2584	2809
7900	1191	1780	2112	2360	2596	2821
7950	1195	1788	2122	2370	2607	2834
8000	1199	1795	2132	2381	2619	2847
8050	1204	1802	2141	2392	2631	2860
8100	1208	1809	2151	2402	2643	2873
8150	1212	1817	2160	2413	2654	2885
8200	1217	1824	2170	2424	2666	2898
8250	1221	1831	2180	2435	2678	2911
8300	1225	1838	2189	2445	2690	2924
8350	1230	1845	2199	2456	2702	2937
8400	1234	1853	2208	2467	2713	2949
8450	1238	1860	2218	2477	2725	2962
8500	1242	1867	2227	2488	2737	2975
8550	1247	1874	2237	2499	2749	2988
8600	1251	1880	2244	2507	2758	2998
8650	1253	1883	2247	2510	2761	3001
8700	1256	1886	2249	2513	2764	3004
8750	1258	1889	2252	2515	2767	3008
8800	1261	1893	2254	2518	2770	3011
8850	1264	1896	2257	2521	2773	3014
8900	1266	1899	2260	2524	2776	3018
8950	1269	1902	2262	2527	2779	3021
9000	1272	1905	2265	2530	2783	3025
9050	1274	1908	2267	2532	2786	3028
9100	1277	1911	2270	2535	2789	3031
9150	1280	1914	2272	2538	2792	3035
9200	1282	1917	2275	2541	2795	3038
9250	1285	1920	2277	2544	2798	3041
9300	1288	1923	2280	2547	2801	3045
9350	1290	1926	2282	2549	2804	3048
9400	1294	1931	2287	2554	2810	3054
9450	1297	1936	2292	2560	2816	3061
9500	1301	1940	2297	2565	2822	3067
9550	1305	1945	2301	2571	2828	3074
9600	1308	1950	2306	2576	2834	3080
9650	1312	1955	2311	2582	2840	3087
9700	1315	1959	2316	2587	2846	3093
9750	1319	1964	2321	2592	2851	3099
9800	1323	1969	2325	2598	2857	3106
9850	1326	1973	2330	2603	2863	3112
9900	1330	1978	2335	2608	2869	3119
9950	1333	1983	2340	2614	2875	3125
10000	1337	1987	2345	2619	2881	3131

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
10050	1340	1992	2349	2624	2887	3138
10100	1344	1997	2354	2630	2893	3144
10150	1348	2002	2359	2635	2898	3151
10200	1353	2009	2367	2644	2908	3161
10250	1358	2016	2375	2653	2918	3172
10300	1363	2024	2383	2662	2928	3183
10350	1368	2031	2392	2672	2939	3194
10400	1374	2039	2400	2681	2949	3206
10450	1379	2046	2408	2690	2959	3217
10500	1384	2054	2417	2700	2970	3228
10550	1390	2061	2425	2709	2980	3239
10600	1395	2069	2434	2718	2990	3250
10650	1400	2076	2442	2728	3000	3261
10700	1406	2084	2450	2737	3011	3273
10750	1411	2091	2459	2746	3021	3284
10800	1416	2099	2467	2756	3031	3295
10850	1422	2106	2475	2765	3042	3306
10900	1427	2114	2484	2774	3052	3317
10950	1432	2121	2492	2784	3062	3328
11000	1438	2129	2501	2793	3072	3340
11050	1443	2136	2509	2802	3083	3351
11100	1448	2144	2517	2812	3093	3362
11150	1454	2151	2526	2821	3103	3373
11200	1459	2159	2534	2830	3113	3384
11250	1464	2166	2542	2840	3124	3396
11300	1470	2174	2551	2849	3134	3407
11350	1475	2181	2559	2858	3144	3418
11400	1479	2188	2567	2868	3154	3429
11450	1483	2194	2575	2877	3164	3440
11500	1487	2200	2584	2886	3174	3451
11550	1491	2207	2592	2895	3185	3462
11600	1494	2213	2600	2904	3195	3472
11650	1498	2219	2608	2913	3205	3483
11700	1502	2226	2616	2922	3215	3494
11750	1506	2232	2624	2932	3225	3505
11800	1510	2238	2633	2941	3235	3516
11850	1513	2244	2641	2950	3245	3527
11900	1517	2251	2649	2959	3255	3538
11950	1521	2257	2657	2968	3265	3549
12000	1525	2263	2665	2977	3275	3560
12050	1529	2270	2673	2986	3285	3571
12100	1533	2276	2682	2995	3295	3582
12150	1536	2282	2690	3005	3305	3593
12200	1540	2288	2698	3014	3315	3603
12250	1544	2295	2706	3023	3325	3614

THIS FORM IS AVAILABLE FOR FREE AT SELFREPRESENT.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
12300	1548	2301	2714	3032	3335	3625
12350	1552	2307	2723	3041	3345	3636
12400	1555	2314	2731	3050	3355	3647
12450	1559	2320	2739	3059	3365	3658
12500	1563	2326	2747	3068	3375	3669
12550	1567	2332	2755	3078	3385	3680
12600	1570	2337	2761	3084	3392	3688
12650	1573	2341	2766	3089	3398	3694
12700	1576	2346	2770	3094	3404	3700
12750	1579	2350	2775	3099	3409	3706
12800	1582	2354	2779	3104	3415	3712
12850	1585	2358	2784	3109	3420	3718
12900	1588	2362	2788	3115	3426	3724
12950	1591	2366	2793	3120	3432	3730
13000	1594	2371	2797	3125	3437	3736
13050	1597	2375	2802	3130	3443	3742
13100	1600	2379	2806	3135	3448	3748
13150	1603	2383	2811	3140	3454	3754
13200	1606	2387	2816	3145	3459	3760
13250	1609	2391	2820	3150	3465	3766
13300	1612	2395	2825	3155	3471	3773
13350	1615	2400	2829	3160	3476	3779
13400	1618	2404	2834	3165	3482	3785
13450	1621	2408	2838	3170	3487	3791
13500	1624	2412	2843	3175	3493	3797
13550	1627	2416	2847	3180	3498	3803
13600	1630	2420	2852	3186	3504	3809
13650	1633	2424	2856	3191	3510	3815
13700	1636	2429	2861	3196	3515	3821
13750	1639	2433	2865	3201	3521	3827
13800	1642	2437	2870	3206	3527	3834
13850	1646	2443	2876	3212	3533	3841
13900	1650	2448	2881	3218	3540	3848
13950	1654	2453	2886	3224	3547	3855
14000	1658	2458	2892	3230	3553	3862
14050	1662	2463	2897	3236	3560	3869
14100	1666	2469	2903	3243	3567	3877
14150	1670	2475	2909	3249	3574	3885
14200	1674	2480	2915	3256	3581	3893
14250	1679	2486	2920	3262	3588	3901
14300	1683	2492	2926	3269	3596	3908
14350	1687	2497	2932	3275	3603	3916
14400	1691	2503	2938	3282	3610	3924
14450	1696	2508	2944	3288	3617	3932
14500	1700	2514	2950	3295	3624	3940

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
14550	1704	2520	2956	3301	3631	3947
14600	1708	2525	2961	3308	3639	3955
14650	1713	2531	2967	3314	3646	3963
14700	1717	2537	2973	3321	3653	3971
14750	1721	2542	2979	3327	3660	3979
14800	1725	2548	2985	3334	3667	3986
14850	1730	2554	2991	3340	3675	3994
14900	1734	2559	2996	3347	3682	4002
14950	1738	2565	3002	3354	3689	4010
15000	1743	2571	3008	3360	3696	4018
15050	1747	2576	3014	3367	3703	4025
15100	1751	2582	3020	3373	3710	4033
15150	1755	2588	3026	3380	3718	4041
15200	1760	2593	3032	3386	3725	4049
15250	1764	2599	3037	3393	3732	4057
15300	1767	2603	3041	3397	3737	4062
15350	1770	2606	3044	3401	3741	4066
15400	1772	2610	3048	3404	3745	4071
15450	1775	2613	3051	3408	3749	4075
15500	1778	2617	3054	3412	3753	4079
15550	1780	2620	3058	3415	3757	4084
15600	1783	2623	3061	3419	3761	4088
15650	1786	2627	3064	3423	3765	4093
15700	1788	2630	3067	3426	3769	4097
15750	1791	2634	3071	3430	3773	4101
15800	1794	2637	3074	3434	3777	4106
15850	1797	2640	3077	3437	3781	4110
15900	1799	2644	3081	3441	3785	4114
15950	1802	2647	3084	3445	3789	4119
16000	1805	2651	3087	3448	3793	4123
16050	1807	2654	3090	3452	3797	4128
16100	1810	2658	3094	3456	3801	4132
16150	1813	2661	3097	3459	3805	4136
16200	1816	2664	3100	3463	3809	4141
16250	1818	2668	3104	3467	3813	4145
16300	1821	2671	3107	3470	3817	4150
16350	1824	2675	3110	3474	3821	4154
16400	1826	2678	3113	3478	3825	4158
16450	1829	2682	3117	3481	3830	4163
16500	1832	2685	3120	3485	3834	4167
16550	1834	2688	3123	3489	3838	4171
16600	1837	2692	3127	3492	3842	4176
16650	1840	2695	3130	3496	3846	4180
16700	1843	2699	3133	3500	3850	4185
16750	1846	2704	3139	3506	3856	4192

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
16800	1851	2711	3147	3515	3866	4203
16850	1856	2717	3154	3523	3876	4213
16900	1860	2724	3162	3532	3885	4224
16950	1865	2731	3170	3541	3895	4234
17000	1870	2738	3178	3550	3905	4245
17050	1875	2745	3186	3559	3914	4255
17100	1879	2752	3194	3567	3924	4266
17150	1884	2759	3202	3576	3934	4276
17200	1889	2765	3209	3585	3943	4287
17250	1893	2772	3217	3593	3952	4296
17300	1897	2778	3224	3601	3961	4305
17350	1902	2784	3231	3609	3969	4315
17400	1906	2790	3237	3616	3978	4324
17450	1910	2796	3244	3624	3986	4333
17500	1914	2802	3251	3632	3995	4343
17550	1918	2808	3258	3640	4004	4352
17600	1923	2814	3265	3647	4012	4361
17650	1927	2820	3272	3655	4021	4370
17700	1931	2826	3279	3663	4029	4380
17750	1935	2832	3286	3671	4038	4389
17800	1939	2838	3293	3678	4046	4398
17850	1943	2844	3300	3686	4055	4408
17900	1948	2850	3307	3694	4063	4417
17950	1952	2857	3314	3702	4072	4426
18000	1956	2863	3321	3709	4080	4435
18050	1960	2869	3328	3717	4089	4445
18100	1964	2875	3335	3725	4097	4454
18150	1969	2881	3342	3733	4106	4463
18200	1973	2887	3349	3741	4115	4473
18250	1977	2893	3356	3748	4123	4482
18300	1981	2899	3363	3756	4132	4491
18350	1985	2905	3370	3764	4140	4500
18400	1990	2911	3377	3772	4149	4510
18450	1994	2917	3383	3779	4157	4519
18500	1998	2923	3390	3787	4166	4528
18550	2002	2929	3397	3795	4174	4538
18600	2006	2935	3404	3803	4183	4547
18650	2010	2941	3411	3810	4191	4556
18700	2015	2947	3418	3818	4200	4565
18750	2019	2954	3425	3826	4209	4575
18800	2023	2960	3432	3834	4217	4584
18850	2027	2966	3439	3841	4226	4593
18900	2031	2972	3446	3849	4234	4603
18950	2036	2978	3453	3857	4243	4612
19000	2040	2984	3460	3865	4251	4621

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
19050	2044	2990	3467	3873	4260	4630
19100	2048	2996	3474	3880	4268	4640
19150	2052	3002	3481	3888	4277	4649
19200	2057	3008	3488	3896	4285	4658
19250	2061	3014	3495	3904	4294	4668
19300	2065	3020	3502	3911	4303	4677
19350	2069	3026	3509	3919	4311	4686
19400	2073	3032	3516	3927	4320	4695
19450	2077	3038	3523	3935	4328	4705
19500	2082	3044	3529	3942	4337	4714
19550	2086	3051	3536	3950	4345	4723
19600	2090	3057	3543	3958	4354	4733
19650	2094	3063	3550	3966	4362	4742
19700	2098	3069	3557	3973	4371	4751
19750	2103	3075	3564	3981	4379	4760
19800	2107	3081	3571	3989	4388	4770
19850	2111	3087	3578	3997	4396	4779
19900	2115	3093	3585	4005	4405	4788
19950	2119	3099	3592	4012	4414	4798
20000	2123	3105	3599	4020	4422	4807
20050	2128	3111	3606	4028	4431	4816
20100	2132	3117	3613	4036	4439	4825
20150	2136	3123	3620	4043	4448	4835
20200	2140	3129	3627	4051	4456	4844
20250	2144	3135	3634	4059	4465	4853
20300	2149	3141	3641	4067	4473	4863
20350	2153	3147	3648	4074	4482	4872
20400	2157	3154	3655	4082	4490	4881
20450	2161	3160	3662	4090	4499	4890
20500	2165	3166	3669	4098	4508	4900
20550	2170	3172	3675	4105	4516	4909
20600	2174	3178	3682	4113	4525	4918
20650	2178	3184	3689	4121	4533	4928
20700	2182	3190	3696	4129	4542	4937
20750	2186	3196	3703	4137	4550	4946
20800	2190	3202	3710	4144	4559	4955
20850	2195	3208	3717	4152	4567	4965
20900	2198	3213	3723	4159	4575	4973
20950	2201	3218	3730	4166	4583	4981
21000	2204	3223	3736	4173	4590	4990
21050	2207	3228	3742	4180	4598	4998
21100	2210	3233	3748	4187	4605	5006
21150	2213	3237	3754	4194	4613	5014
21200	2216	3242	3760	4200	4621	5023
21250	2219	3247	3767	4207	4628	5031

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.PRESCOTT.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
21300	2222	3252	3773	4214	4636	5039
21350	2225	3257	3779	4221	4643	5047
21400	2228	3262	3785	4228	4651	5056
21450	2231	3267	3791	4235	4658	5064
21500	2234	3271	3798	4242	4666	5072
21550	2237	3276	3804	4249	4673	5080
21600	2240	3281	3809	4255	4681	5088
21650	2243	3285	3815	4262	4688	5096
21700	2246	3290	3821	4268	4695	5104
21750	2249	3295	3827	4275	4702	5111
21800	2252	3299	3833	4281	4710	5119
21850	2255	3304	3839	4288	4717	5127
21900	2257	3309	3845	4295	4724	5135
21950	2260	3313	3851	4301	4731	5143
22000	2263	3318	3856	4308	4738	5151
22050	2266	3322	3862	4314	4746	5159
22100	2269	3327	3868	4321	4753	5166
22150	2272	3332	3874	4327	4760	5174
22200	2275	3336	3880	4334	4767	5182
22250	2278	3341	3886	4340	4775	5190
22300	2281	3346	3892	4347	4782	5198
22350	2283	3350	3898	4354	4789	5206
22400	2286	3355	3903	4360	4796	5213
22450	2289	3360	3909	4367	4803	5221
22500	2292	3364	3915	4373	4811	5229
22550	2295	3369	3921	4380	4818	5237
22600	2298	3373	3927	4386	4825	5245
22650	2301	3378	3933	4393	4832	5253
22700	2304	3383	3939	4400	4839	5260
22750	2307	3387	3945	4406	4847	5268
22800	2310	3392	3950	4413	4854	5276
22850	2312	3397	3956	4419	4861	5284
22900	2315	3401	3962	4426	4868	5292
22950	2318	3406	3968	4432	4876	5300
23000	2321	3410	3974	4439	4883	5308
23050	2324	3415	3980	4445	4890	5315
23100	2327	3420	3986	4452	4897	5323
23150	2330	3424	3992	4459	4904	5331
23200	2333	3429	3997	4465	4912	5339
23250	2336	3434	4003	4472	4919	5347
23300	2338	3438	4009	4478	4926	5355
23350	2341	3443	4015	4485	4933	5362
23400	2344	3447	4021	4491	4940	5370
23450	2347	3452	4027	4498	4948	5378
23500	2350	3457	4033	4504	4955	5386

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
23550	2353	3461	4039	4511	4962	5394
23600	2356	3466	4044	4518	4969	5402
23650	2359	3471	4050	4524	4977	5410
23700	2362	3475	4056	4531	4984	5417
23750	2364	3480	4062	4537	4991	5425
23800	2367	3484	4068	4544	4998	5433
23850	2370	3489	4074	4550	5005	5441
23900	2373	3494	4080	4557	5013	5449
23950	2376	3498	4086	4564	5020	5457
24000	2379	3503	4091	4570	5027	5464
24050	2382	3508	4097	4577	5034	5472
24100	2385	3512	4103	4583	5042	5480
24150	2388	3517	4109	4590	5049	5488
24200	2390	3521	4115	4596	5056	5496
24250	2393	3526	4121	4603	5063	5504
24300	2396	3531	4127	4609	5070	5512
24350	2399	3535	4132	4616	5078	5519
24400	2402	3540	4138	4623	5085	5527
24450	2405	3545	4144	4629	5092	5535
24500	2408	3549	4150	4636	5099	5543
24550	2411	3554	4156	4642	5106	5551
24600	2414	3558	4162	4649	5114	5559
24650	2416	3563	4168	4655	5121	5566
24700	2419	3568	4174	4662	5128	5574
24750	2422	3572	4179	4668	5135	5582
24800	2425	3577	4185	4675	5143	5590
24850	2428	3582	4191	4682	5150	5598
24900	2431	3586	4197	4688	5157	5606
24950	2434	3591	4203	4695	5164	5613
25000	2437	3595	4209	4701	5171	5621
25050	2440	3600	4215	4708	5179	5629
25100	2442	3605	4221	4714	5186	5637
25150	2445	3609	4226	4721	5193	5645
25200	2448	3614	4232	4728	5200	5653
25250	2451	3619	4238	4734	5207	5661
25300	2454	3623	4244	4741	5215	5668
25350	2457	3628	4250	4747	5222	5676
25400	2460	3632	4256	4754	5229	5684
25450	2463	3637	4262	4760	5236	5692
25500	2466	3642	4268	4767	5244	5700
25550	2468	3646	4273	4773	5251	5708
25600	2471	3651	4279	4780	5258	5715
25650	2474	3656	4285	4787	5265	5723
25700	2477	3660	4291	4793	5272	5731
25750	2480	3665	4297	4800	5280	5739

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
25800	2483	3669	4303	4806	5287	5747
25850	2486	3674	4309	4813	5294	5755
25900	2489	3679	4315	4819	5301	5763
25950	2492	3683	4320	4826	5309	5770
26000	2494	3688	4326	4832	5316	5778
26050	2497	3693	4332	4839	5323	5786
26100	2500	3697	4338	4846	5330	5794
26150	2503	3702	4344	4852	5337	5802
26200	2506	3706	4350	4859	5345	5810
26250	2509	3711	4356	4865	5352	5817
26300	2512	3716	4362	4872	5359	5825
26350	2515	3720	4367	4878	5366	5833
26400	2518	3725	4373	4885	5373	5841
26450	2520	3730	4379	4892	5381	5849
26500	2523	3734	4385	4898	5388	5857
26550	2526	3739	4391	4905	5395	5864
26600	2529	3743	4397	4911	5402	5872
26650	2532	3748	4403	4918	5410	5880
26700	2535	3753	4409	4924	5417	5888
26750	2538	3757	4414	4931	5424	5896
26800	2541	3762	4420	4937	5431	5904
26850	2544	3767	4426	4944	5438	5912
26900	2546	3771	4432	4951	5446	5919
26950	2549	3776	4438	4957	5453	5927
27000	2552	3780	4444	4964	5460	5935
27050	2555	3785	4450	4970	5467	5943
27100	2558	3790	4456	4977	5475	5951
27150	2561	3794	4461	4983	5482	5959
27200	2564	3799	4467	4990	5489	5966
27250	2567	3804	4473	4997	5496	5974
27300	2570	3808	4479	5003	5503	5982
27350	2572	3813	4485	5010	5511	5990
27400	2575	3817	4491	5016	5518	5998
27450	2578	3822	4497	5023	5525	6006
27500	2581	3827	4503	5029	5532	6014
27550	2584	3831	4508	5036	5539	6021
27600	2587	3836	4514	5042	5547	6029
27650	2590	3841	4520	5049	5554	6037
27700	2593	3845	4526	5056	5561	6045
27750	2596	3850	4532	5062	5568	6053
27800	2598	3855	4538	5069	5576	6061
27850	2601	3859	4544	5075	5583	6068
27900	2604	3864	4549	5081	5589	6076
27950	2607	3868	4554	5087	5595	6082
28000	2610	3872	4559	5092	5601	6089

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
28050	2613	3877	4564	5098	5607	6095
28100	2616	3881	4569	5103	5613	6102
28150	2619	3885	4573	5109	5619	6108
28200	2622	3889	4578	5114	5625	6115
28250	2625	3894	4583	5119	5631	6121
28300	2628	3898	4588	5125	5637	6128
28350	2631	3902	4593	5130	5643	6134
28400	2634	3907	4598	5136	5649	6141
28450	2637	3911	4603	5141	5655	6147
28500	2640	3915	4608	5147	5661	6154
28550	2643	3920	4612	5152	5667	6160
28600	2646	3924	4617	5157	5673	6167
28650	2649	3928	4622	5163	5679	6173
28700	2652	3932	4627	5168	5685	6180
28750	2655	3937	4632	5174	5691	6186
28800	2658	3941	4637	5179	5697	6193
28850	2661	3945	4642	5185	5703	6199
28900	2664	3950	4647	5190	5709	6206
28950	2667	3954	4651	5196	5715	6212
29000	2670	3958	4656	5201	5721	6219
29050	2673	3963	4661	5206	5727	6225
29100	2676	3967	4666	5212	5733	6232
29150	2679	3971	4671	5217	5739	6238
29200	2682	3976	4676	5223	5745	6245
29250	2685	3980	4681	5228	5751	6251
29300	2688	3984	4685	5234	5757	6258
29350	2692	3988	4690	5239	5763	6264
29400	2695	3993	4695	5245	5769	6271
29450	2698	3997	4700	5250	5775	6277
29500	2701	4001	4705	5255	5781	6284
29550	2704	4006	4710	5261	5787	6290
29600	2707	4010	4715	5266	5793	6297
29650	2710	4014	4720	5272	5799	6303
29700	2713	4019	4724	5277	5805	6310
29750	2716	4023	4729	5283	5811	6316
29800	2719	4027	4734	5288	5817	6323
29850	2722	4031	4739	5294	5823	6329
29900	2725	4036	4744	5299	5829	6336
29950	2728	4040	4749	5304	5835	6343
30000	2731	4044	4754	5310	5841	6349
30050	2734	4049	4759	5315	5847	6356
30100	2737	4053	4763	5321	5853	6362
30150	2740	4057	4768	5326	5859	6369
30200	2743	4062	4773	5332	5865	6375
30250	2746	4066	4778	5337	5871	6382

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
30300	2749	4070	4783	5343	5877	6388
30350	2752	4074	4788	5348	5883	6395
30400	2755	4079	4793	5353	5889	6401
30450	2758	4083	4798	5359	5895	6408
30500	2761	4087	4802	5364	5901	6414
30550	2764	4092	4807	5370	5907	6421
30600	2767	4096	4812	5375	5913	6427
30650	2770	4100	4817	5381	5919	6434
30700	2773	4105	4822	5386	5925	6440
30750	2776	4109	4827	5392	5931	6447
30800	2779	4113	4832	5397	5937	6453
30850	2782	4118	4837	5402	5943	6460
30900	2785	4122	4841	5408	5949	6466
30950	2788	4126	4846	5413	5955	6473
31000	2791	4130	4851	5419	5961	6479
31050	2794	4135	4856	5424	5967	6486
31100	2797	4139	4861	5430	5973	6492
31150	2800	4143	4866	5435	5979	6499
31200	2803	4148	4871	5440	5985	6505
31250	2806	4152	4876	5446	5991	6512
31300	2809	4156	4880	5451	5997	6518
31350	2812	4161	4885	5457	6003	6525
31400	2815	4165	4890	5462	6008	6531
31450	2818	4169	4895	5468	6014	6538
31500	2821	4173	4900	5473	6020	6544
31550	2824	4178	4905	5479	6026	6551
31600	2827	4182	4910	5484	6032	6557
31650	2830	4186	4914	5489	6038	6564
31700	2833	4191	4919	5495	6044	6570
31750	2836	4195	4924	5500	6050	6577
31800	2839	4199	4929	5506	6056	6583
31850	2842	4204	4934	5511	6062	6590
31900	2845	4208	4939	5517	6068	6596
31950	2848	4212	4944	5522	6074	6603
32000	2851	4217	4949	5528	6080	6609
32050	2854	4221	4953	5533	6086	6616
32100	2857	4225	4958	5538	6092	6622
32150	2860	4229	4963	5544	6098	6629
32200	2863	4234	4968	5549	6104	6635
32250	2866	4238	4973	5555	6110	6642
32300	2869	4242	4978	5560	6116	6648
32350	2872	4247	4983	5566	6122	6655
32400	2875	4251	4988	5571	6128	6661
32450	2878	4255	4992	5577	6134	6668
32500	2881	4260	4997	5582	6140	6674

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Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
32550	2884	4264	5002	5587	6146	6681
32600	2887	4268	5007	5593	6152	6687
32650	2890	4272	5012	5598	6158	6694
32700	2893	4277	5017	5604	6164	6700
32750	2896	4281	5022	5609	6170	6707
32800	2899	4285	5027	5615	6176	6713
32850	2902	4290	5031	5620	6182	6720
32900	2905	4294	5036	5626	6188	6726
32950	2908	4298	5041	5631	6194	6733
33000	2911	4303	5046	5636	6200	6739
33050	2914	4307	5051	5642	6206	6746
33100	2917	4311	5056	5647	6212	6752
33150	2920	4315	5061	5653	6218	6759
33200	2923	4320	5066	5658	6224	6766
33250	2926	4324	5070	5664	6230	6772
33300	2929	4328	5075	5669	6236	6779
33350	2932	4333	5080	5675	6242	6785
33400	2935	4337	5085	5680	6248	6792
33450	2938	4341	5090	5685	6254	6798
33500	2941	4346	5095	5691	6260	6805
33550	2944	4350	5100	5696	6266	6811
33600	2947	4354	5105	5702	6272	6818
33650	2950	4359	5109	5707	6278	6824
33700	2953	4363	5114	5713	6284	6831
33750	2956	4367	5119	5718	6290	6837
33800	2959	4371	5124	5724	6296	6844
33850	2962	4376	5129	5729	6302	6850
33900	2965	4380	5134	5734	6308	6857
33950	2968	4384	5139	5740	6314	6863
34000	2971	4389	5143	5745	6320	6870
34050	2974	4393	5148	5751	6326	6876
34100	2977	4397	5153	5756	6332	6883
34150	2980	4402	5158	5762	6338	6889
34200	2983	4406	5163	5767	6344	6896
34250	2986	4410	5168	5772	6350	6902
34300	2989	4414	5173	5778	6356	6909
34350	2992	4419	5178	5783	6362	6915
34400	2995	4423	5182	5789	6368	6922
34450	2998	4427	5187	5794	6374	6928
34500	3001	4432	5192	5800	6380	6935
34550	3004	4436	5197	5805	6386	6941
34600	3007	4440	5202	5811	6392	6948
34650	3010	4445	5207	5816	6398	6954
34700	3013	4449	5212	5821	6404	6961
34750	3016	4453	5217	5827	6410	6967

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Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
34800	3019	4458	5221	5832	6416	6974
34850	3022	4462	5226	5838	6422	6980
34900	3025	4466	5231	5843	6428	6987
34950	3028	4470	5236	5849	6434	6993
35000	3031	4475	5241	5854	6440	7000
35050	3034	4479	5246	5860	6446	7006
35100	3037	4483	5251	5865	6452	7013
35150	3040	4488	5256	5870	6457	7019
35200	3043	4492	5260	5876	6463	7026
35250	3046	4496	5265	5881	6469	7032
35300	3049	4501	5270	5887	6475	7039
35350	3052	4505	5275	5892	6481	7045
35400	3055	4509	5280	5898	6487	7052
35450	3058	4513	5285	5903	6493	7058
35500	3061	4518	5290	5909	6499	7065
35550	3064	4522	5295	5914	6505	7071
35600	3067	4526	5299	5919	6511	7078
35650	3070	4531	5304	5925	6517	7084
35700	3073	4535	5309	5930	6523	7091
35750	3076	4539	5314	5936	6529	7097
35800	3079	4544	5319	5941	6535	7104
35850	3082	4548	5324	5947	6541	7110
35900	3085	4552	5329	5952	6547	7117
35950	3089	4556	5334	5958	6553	7123
36000	3092	4561	5338	5963	6559	7130
36050	3095	4565	5343	5968	6565	7136
36100	3098	4569	5348	5974	6571	7143
36150	3101	4574	5353	5979	6577	7149
36200	3104	4578	5358	5985	6583	7156
36250	3107	4582	5363	5990	6589	7162
36300	3110	4587	5368	5996	6595	7169
36350	3113	4591	5372	6001	6601	7175
36400	3116	4595	5377	6007	6607	7182
36450	3119	4600	5382	6012	6613	7188
36500	3122	4604	5387	6017	6619	7195
36550	3125	4608	5392	6023	6625	7202
36600	3128	4612	5397	6028	6631	7208
36650	3131	4617	5402	6034	6637	7215
36700	3134	4621	5407	6039	6643	7221
36750	3137	4625	5411	6045	6649	7228
36800	3140	4630	5416	6050	6655	7234
36850	3143	4634	5421	6055	6661	7241
36900	3146	4638	5426	6061	6667	7247
36950	3149	4643	5431	6066	6673	7254
37000	3152	4647	5436	6072	6679	7260

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.PRESS.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
37050	3155	4651	5441	6077	6685	7267
37100	3158	4655	5446	6083	6691	7273
37150	3161	4660	5450	6088	6697	7280
37200	3164	4664	5455	6094	6703	7286
37250	3167	4668	5460	6099	6709	7293
37300	3170	4673	5465	6104	6715	7299
37350	3173	4677	5470	6110	6721	7306
37400	3176	4681	5475	6115	6727	7312
37450	3179	4686	5480	6121	6733	7319
37500	3182	4690	5485	6126	6739	7325
37550	3185	4694	5489	6132	6745	7332
37600	3188	4698	5494	6137	6751	7338
37650	3191	4703	5499	6143	6757	7345
37700	3194	4707	5504	6148	6763	7351
37750	3197	4711	5509	6153	6769	7358
37800	3200	4716	5514	6159	6775	7364
37850	3203	4720	5519	6164	6781	7371
37900	3206	4724	5524	6170	6787	7377
37950	3209	4729	5528	6175	6793	7384
38000	3212	4733	5533	6181	6799	7390
38050	3215	4737	5538	6186	6805	7397
38100	3218	4742	5543	6192	6811	7403
38150	3221	4746	5548	6197	6817	7410
38200	3224	4750	5553	6202	6823	7416
38250	3227	4754	5558	6208	6829	7423
38300	3230	4759	5563	6213	6835	7429
38350	3233	4763	5567	6219	6841	7436
38400	3236	4767	5572	6224	6847	7442
38450	3239	4772	5577	6230	6853	7449
38500	3242	4776	5582	6235	6859	7455
38550	3245	4780	5587	6241	6865	7462
38600	3248	4785	5592	6246	6871	7468
38650	3251	4789	5597	6251	6877	7475
38700	3254	4793	5601	6257	6883	7481
38750	3257	4797	5606	6262	6889	7488
38800	3260	4802	5611	6268	6895	7494
38850	3263	4806	5616	6273	6901	7501
38900	3266	4810	5621	6279	6906	7507
38950	3269	4815	5626	6284	6912	7514
39000	3272	4819	5631	6290	6918	7520
39050	3275	4823	5636	6295	6924	7527
39100	3278	4828	5640	6300	6930	7533
39150	3281	4832	5645	6306	6936	7540
39200	3284	4836	5650	6311	6942	7546
39250	3287	4841	5655	6317	6948	7553

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.MO.GOV

Combined Adjusted Gross Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
39300	3290	4845	5660	6322	6954	7559
39350	3293	4849	5665	6328	6960	7566
39400	3296	4853	5670	6333	6966	7572
39450	3299	4858	5675	6338	6972	7579
39500	3302	4862	5679	6344	6978	7585
39550	3305	4866	5684	6349	6984	7592
39600	3308	4871	5689	6355	6990	7598
39650	3311	4875	5694	6360	6996	7605
39700	3314	4879	5699	6366	7002	7611
39750	3317	4884	5704	6371	7008	7618
39800	3320	4888	5709	6377	7014	7624
39850	3323	4892	5714	6382	7020	7631
39900	3326	4896	5718	6387	7026	7638
39950	3329	4901	5723	6393	7032	7644
40000	3332	4905	5728	6398	7038	7651

THIS FORM IS AVAILABLE FOR FREE AT SELFHELP.KENT.MO.GOV

Child Care Tax Credit Table

Gross Monthly Income Of Parent Entitled To Receive Support	Tax Credit %	Tax Credit for One Child $250.00	Tax Credit for More than One Child $500.00
$ 0 to 1,250	.35	$88	$175
1,251 to 1,416	.34	85	170
1,417 to 1,583	.33	83	165
1,584 to 1,750	.32	80	160
1,751 to 1,916	.31	78	155
1,917 to 2,083	.30	75	150
2,084 to 2,250	.29	74	145
2,251 to 2,416	.28	70	140
2,417 to 2,583	.27	68	135
2,584 to 2,750	.26	65	130
2,751 to 2,916	.25	63	125
2,917 to 3,083	.24	60	120
3,084 to 3,250	.23	58	115
3,251 to 3,416	.22	55	110
3,417 to 3,583	.21	53	105
3,583 or above	.20	50	100

Form 2441, Internal Revenue Service (2023)

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Line 11 Adjustment

Number of Overnights	Adjustment
Less than 36	0%
36-72	6%
73-91	9%
92-109	10%
110-115	13%
116-119	15%
120-125	17%
126-130	20%
131-136	23%
137-141	25%
142-147	27%
148-152	28%
153-158	29%
159-164	30%

Number of Overnights	Adjustment
165-170	31%
171-175	32%
176-180	33%
181-183	34%

Self Support Reserve
Area above double line in the Child Support Guideline Review Updated Schedule is drawn below the income level that represents the self-support reserve.

1 child	2 children	3 children	4 children	5 children	6 children
$1,750	$2,200	$2,550	$2,850	$3,100	$3,600

THIS FORM IS AVAILABLE FOR FREE AT SELFREPRESENT.MO.GOV