

CHILD SUPPORT GUIDELINES - SHARED PARENTING WORKSHEET

Case Name: _____ vs. _____ <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <i>Plaintiff</i> <i>Defendant</i> </div> <p style="margin-top: 10px;">PPR is the <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant</p>	County: _____ Docket #: _____ Number of Children: _____
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<i>All amounts must be weekly</i>	PARENT OF PRIMARY RESIDENCE (PPR)	PARENT OF ALTERNATE RESIDENCE (PAR)	COMBINED
1. Gross Taxable Income	-	-	
1a. Mandatory Retirement Contributions (non-taxable)	-	-	
1b. Alimony Paid (Current and/or past relationships)	-	-	
1c. Alimony Received (Current and/or past relationships)	+	-	
2. Adjusted Gross Taxable Income ((L1 - L1a - L1b) + L1c)	-	-	
2a. Federal, State and Local Income Tax Withholding	-	-	
2b. Prior Child Support Orders (Past relationships)	-	-	
2c. Mandatory Union Dues	-	-	
2d. Other Dependent Deduction (L14 of a Sole Parenting worksheet)	-	-	
3. Net Taxable Income (L2 - L2a - L2b - L2c - L2d)	-	-	
4. Non-Taxable Income (source: _____)	+	-	
5. Net Income (L3 + L4)	-	-	-
6. Percent Share of Income (L5 each parent ÷ L5 Combined)	- %	- %	100%
7. Number of Overnights With Each Parent	-	-	365
8. Percent of Overnights With Parent (L7 Parent ÷ L7 Combined)	- %	- %	100%
<i>If PAR time sharing is less than the equivalent of two overnights per week (28%), use Sole Custody Worksheet.</i>			
9. Basic Child Support Amount (from Appendix IX-F Schedules)			-
10. PAR Shared Parenting Fixed Expenses (PAR L8 x L9 x 0.38 x 2)		-	
11. Government Benefits for the Child			-
12. Shared Parenting Basic Child Support Amount ((L9 + L10) - L11)			-
13. PAR Share of SP Basic Child Support Amount (PAR L6 x L12)		-	
14. PAR Shared Parenting Variable Expenses (PAR L8 x L9 x 0.37)		-	
15. PAR Adjusted SP Basic Child Support Amount (L13 - L10 - L14)		-	
16. Net Work-Related Child Care (from Appendix IX-E Worksheet)			-
17. Child's Share of Health Insurance Premium	+		-
18. Unreimbursed Health Care Expenses over \$250/child/year	+		-
19. Court-Approved Extraordinary Expenses	+		-
20. Total Supplemental Expenses (L16 + L17 + L18 + L19)			-

Continued on Page 2

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<i>All amounts must be weekly.</i>	PPR	PAR	COMBINED
20. Total Supplemental Expenses (from reverse side)			-
21. PAR's Share of Total Supplemental Expenses (PAR L6 x L20)		-	
22. PAR Net Work-Related Child Care PAID		-	
23. PAR Health Insurance Premium for the Child PAID +		-	
24. PAR Unreimbursed Health Care Expenses (> \$250/child/year) PAID +		-	
25. PAR Court-Approved Extraordinary Expenses PAID +		-	
26. PAR Total Payments/Supplemental Expenses (L22 + L23 + L24 + L25)		-	
27. PAR Net Supplemental Expenses (L21 - L26)		-	
28. PAR Net Child Support Obligation (L15 + L27)		-	

If neither parent is requesting the other-dependent adjustment, go to line 32.

29. Line 28 PAR CS Obligation WITH Other-Dependent Deduction		-	
30. Line 28 PAR CS Obligation WITHOUT Other-Dependent Deduction		-	
31. Adjusted PAR CS Obligation ((L29 + L30) ÷ 2)		-	
32. Self-Support Reserve Test. (PAR L5 - PAR L28 or L31 if any). If PAR amount is greater than 105% of the poverty guideline for one person (pg) <u>or</u> the PPR L32 income is less than the pg, enter the L28 or L31 amount on the PAR L34. If PAR L32 amount is less than the pg and the PPR's L32 income is greater than the pg, go to Line 33. If L28 or L31 is negative, see App. IX-B (shared parenting worksheet) for instructions.	-	-	
33. Maximum CS Obligation (Obligor Parent's L5 net income - 105% of the poverty guideline for one person). Enter result here and on Line 34.	-	-	
34. Child Support Order (negative L28 or L31 denotes PPR Obligation)	-	-	

If the PAR is the Obligor, Continue to Line 35

35. PPR Household Income Test (L5 PPR net income from all sources + Net income of other household members + L34 order). If less than the PPR household income threshold (See App. IX-A, ¶14(c)), the SOLE-CUSTODY WORKSHEET must be used.	-		
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COMMENTS, REBUTTALS, AND JUSTIFICATION FOR DEVIATIONS

1. This child support order was was not based on the child support guidelines award.

2. If different from the child support guidelines award (Line 34), enter amount ordered: \$

3. The child support guidelines were not used or the guidelines award was adjusted because:

(additional pages attached)

4. The following extraordinary expenses were added to the basic support obligation:

5. Custodial Taxes: App IX-H () Circ E () Other: _____ # Allowances: _____ Marital: S M H
 Non-Custodial Taxes: App IX-H () Circ E () Other: _____ # Allowances: _____ Marital: S M H

Prepared by:	Title:	Date:
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