This form contains Restricted Information.

CIRCUIT COURT FOR _____ **, MARYLAND**
City/County

Located at _____ **Case No.** _____

Court Address

vs.

Plaintiff _____   Defendant _____

Address _____   Address _____

City, State, Zip _____ Telephone _____   City, State, Zip _____ Telephone _____

WORKSHEET B - CHILD SUPPORT OBLIGATION: SHARED PHYSICAL CUSTODY
Md. Rule 9-206(d)

MDEC counties only: You must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission.

Name of Child	Date of Birth	Name of Child	Date of Birth
Name of Child	Date of Birth	Name of Child	Date of Birth
Name of Child	Date of Birth	Name of Child	Date of Birth

	Parent 1	Parent 2	Combined
1. **MONTHLY ACTUAL INCOME** (Before taxes) (Code, Family Law Article, § 12-201(b))			
a. Minus preexisting child support payment actually paid	-	-	
b. Minus alimony actually paid	-	-	
c. Plus/Minus alimony awarded in this case	+/-	+/-	
2. **MONTHLY ADJUSTED ACTUAL INCOME**			
3. **PERCENTAGE SHARE OF INCOME** (Divide each parent's income on line 2 by the combined income on line 2).	%	%	
4. **BASIC CHILD SUPPORT OBLIGATION** (Apply line 2 Combined Income to the Child Support Schedule.)			
5. **ADJUSTED BASIC CHILD SUPPORT OBLIGATION** (Multiply line 4 by 1.5)			
6. **OVERNIGHTS with each parent** (must total 365)			365
7. **PERCENTAGE WITH EACH PARENT** (Line 6 divided by 365)	A %	B %	
STOP HERE IF line 7 is less than 35% for either parent. Shared physical custody does not apply. (Use WORKSHEET A, instead.)			
8. **EACH PARENT'S THEORETICAL CHILD SUPPORT OBLIGATION** (Multiply line 5 by line 3 for each parent.)	A	B	

	Parent 1	Parent 2	Combined
9. **BASIC CHILD SUPPORT OBLIGATION FOR TIME WITH OTHER PARENT** (Multiply line 8A by line 7B and put answer on line 9A.) (Multiply line 8B by line 7A and put answer on line 9B.)	A	B	
10. **NET BASIC CHILD SUPPORT OBLIGATION** (Subtract lesser amount from greater amount in line 9 and place answer here under column with greater amount in line 9).			
11. **EXPENSES :**			
a. Work-Related Child Care Expenses (Code, Family Law Article § 12-204(g))			+
b. Health Insurance Expenses (Code, Family Law Article § 12-204(h)(1))			+
c. Extraordinary Medical Expenses (Code, Family Law Article § 12-204(h)(2))			+
d. Cash Medical Support (Code, Family Law Article § 12-102(c) applies only to a child support order under Title IV, Part D of the Social Security Act)			+
e. Additional Expenses (Code, Family Law Article § 12-204(i))			+
12. **NET ADJUSTMENT FROM WORKSHEET C.** Enter amount from line 1, WORKSHEET C, if applicable. If not, continue to line 13.			
13. **NET BASIC CHILD SUPPORT OBLIGATION** (From line 10, WORKSHEET B)			
14. **RECOMMENDED CHILD SUPPORT ORDER** (If the same parent owes money under lines 12 and line 13, add these two figures to obtain the amount owed by that parent. If one parent owes money under line 12 and the other owes money under line 13, subtract the lesser amount from the greater amount to obtain the difference. The parent owing the greater of the two amounts on lines 12 and 13 will owe that difference as the child support obligation. NOTE: The amount owed in a shared custody arrangement may not exceed the amount that would be owed if the obligor parent were a non-custodial parent. See WORKSHEET A).			

Comments or special adjustments, such as any adjustment for certain third party benefits paid to or for the child of an obligor who is disabled, retired, or receiving benefits as a result of a compensable claim (see Code, Family Law Article, § 12-204(j)):

PREPARED BY: DATE:

INSTRUCTIONS FOR WORKSHEET C: Use Worksheet C ONLY if any of the expenses listed in Lines 11a, 11b, 11c, 11d, or 11e is directly paid out or received by the parents in a different proportion than the percentage share of income entered on line 3 of Worksheet B. Example: If one parent pays all of the day care, or parents split education/medical costs 50/50 and line 3 is other than 50/50. If there is more than one 11e expense, the calculations on Lines i and j below must be made for each expense.

WORKSHEET C - FOR ADJUSTMENTS, LINE 12, WORKSHEET B

	Parent 1	Parent 2
a. Total amount of direct payments made for Line 11a expenses multiplied by each parent's percentage of income (Line 3, WORKSHEET B) (Proportionate share)		
b. The excess amount of direct payments made by the parent who pays more than the amount calculated in Line a, above. (The difference between amount paid and proportionate share).		
c. Total amount of direct payments made for Line 11b expenses multiplied by each parent's percentage of income (Line 3, WORKSHEET B).		
d. The excess amount of direct payments made by the parent who pays more than the amount calculated on line c, above.		
e. Total amount of direct payments made for Line 11c expenses multiplied by each parent's percentage of income (Line 3, WORKSHEET B).		
f. The excess amount of direct payments made by the parent who pays more than the amount calculated in line e, above.		
g. Total amount of direct payments made for Line 11d expenses multiplied by each parent's percentage of income (Line 3, WORKSHEET B).		
h. The excess amount of direct payments made by the parent who pays more than the amount calculated in Line g, above.		
i. Total amount of direct payments made for Line 11e expenses multiplied by each parent's percentage of income (Line 3, WORKSHEET B).		
j. The excess amount of direct payments made by the parent who pays more than the amount calculated in Line i, above.		
k. For each parent, add lines b, d, f, h, and j.		
l. Subtract lesser amount from greater amount in Line k, above. Place the answer on this line under the lesser amount in Line k. Also enter this answer on line 12 of WORKSHEET B, in the same parent's column.		