

FOOD STAMP/SNAP WORKSHEET

1. Gross Earned Income _____
2. ADD Gross Unearned Income + _____
3. TOTAL GROSS Monthly income = _____
Compare with Gross Income Test

INCOME DEDUCTIONS

4. SUBTRACT Earnings Deduction (20% of gross earnings in Line 1) - _____
5. SUBTRACT Standard Deduction - _____
 HH Size: 1-3 = \$144;
 4 = \$147; 5 = \$172; 6+ = \$197
6. SUBTRACT Excess Medical Deduction (See Box A - Elder/Disabled only) - _____
7. SUBTRACT Child Support Paid Out - _____
8. SUBTRACT Dependent Care (full amount) - _____
9. SUBTRACT Homeless Deduction (\$143) - _____
 (only if homeless household not claiming regular Shelter Deduction)

PRELIMINARY ADJUSTED NET INCOME (PANI) = _____

10. SUBTRACT Excess Shelter (see Box B) - _____
 Amount capped at \$446 deduction
 NO capped amt for Elder/Disabled HHs

MONTHLY NET INCOME = _____

To estimate APPROXIMATE benefit:

1. Take 30% of Monthly Net Income X .3

 = _____
2. Maximum FS benefit for Household size (see chart to right) _____
3. SUBTRACT Line 1 (30% of Net) - _____

APPROX. MONTHLY BENEFIT* = _____

*This is an *approximate* figure. If you meet the Net Income Requirement, you should apply for Food Stamps.

GROSS INCOME TESTS

Household Size	200% FPL	130% FPL; 18-59 No child or disability
1	\$ 1,734	\$ 1,127
2	2,334	1,517
3	2,934	1,907
4	3,534	2,297
5	4,134	2,687
6	4,734	3,077
7	5,334	3,467
8	5,934	3,857
Each add'l member	600	390

Box A - Medical Deduction (Item #4)

Medical Expenses	_____
Threshold - \$35	<u>- 35</u>
Medical Deduction	<u>= _____*</u>

* If medical deduction > \$35, enter \$90 standard deduction on Item #6. If actual medical expense > \$125/month, then use actual less \$35.

Box B - Shelter Deduction (Item #9)

Rent/Mortgage	_____
Add SUA amount*	<u>+</u> _____
TOTAL shelter expenses	<u>=</u> _____
Shelter Standard - (Divide PANI by 2)	<u>-</u> _____
Excess Shelter Deduction	<u>= _____**</u>

** Enter maximum \$446 shelter on Item #10 unless elder/disabled person in H/H, then use actual amount.

* **SUA (Standard Utility Allowance):**
 \$612/mo - heating or AC costs or fuel assist
 \$375/mo - utilities only (non-heating/cooling)
 \$ 44/mo - telephone/cell phone only

NET INCOME TEST & FS MAXIMUMS

Household Size	Maximum Net Income*	Maximum FS Benefit
1	\$ 867	\$ 176
2	1,167	323
3	1,467	463
4	1,767	588
5	2,067	698
6	2,367	838
7	2,667	926
8	2,967	1,058
Each add'l member	300	132

*Net income test does not apply to households with child under 19, pregnant women, EAEDC or SSI recipients.