

Food Stamp Income Worksheet For Households WITH an Elderly (60 ±) or Disabled Member

Revised May, 2006

Number in Household: _____ Household Resource Limit: _____ Household Resources:
\$ _____
(No limit if categorically eligible)

A. List all **gross monthly earned income** (don't list excluded income)

1) wages _____

2) training allowance _____

3) self-employment or farm income _____

4) net boarder/roomer income
(income minus business expense) _____

5) rental income (if property managed by self) _____

➔ Add together A1-A5 **Gross earned income** A. _____

B. Multiply total earned income (A) by .8
(This is the 20% **earned income deduction**) **Net earned income** B. _____

C. List all **monthly unearned income** (don't list excluded income)

1) public benefits (Reach Up, SSI, SSD, VA, etc.) _____

2) net rental income (if property managed by third party) _____

3) child support and/or alimony received _____

4) countable dividends, interest, royalties _____

5) countable educational income _____

6) other _____

➔ Add together C1-C6 **Total unearned income** C. _____

D. Add net earned income (B) and total unearned income (C) **Total income** D. _____

E. List the **standard deduction** (P-2590 A1) E. _____
(\$134 for HH of 1-4; \$157 for HH of 5; \$179 for HH of 6 or more)

F. List monthly **medical expenses over \$35** of household members who are elderly or disabled
(Total monthly expenses are _____ - \$35 = _____) F. _____

G. List monthly **dependent care costs** G. _____
(up to \$200.00 per dependent under age 2, \$175.00 for ages 2+)

H. List **court-ordered child support** payments (amount actually paid) H. _____

I. Subtract standard deduction (E), medical expenses (F), dependent care costs (G), and child support (H) from total income (D)

Adjusted Income I. _____
(Please continue on next page.)

*This Tool Provides Only an Estimate of Benefits.
For an Actual Determination of Benefits and Eligibility You Must Contact the Food Stamp Office.*

[pg. 2, elderly or disabled]

Adjusted Income I. _____

J. Calculate monthly **shelter costs**.

- 1) rent _____
- 2) mortgage _____
- 3) property taxes _____
- 4) insurance (structure only) _____
(Divide annual cost by 12 to get monthly amount)
- 5) choose the **standard utility allowance** (a, b, or c) that applies (See P-2590 A1 #5): _____
 - a) \$513 (household pays all utilities) or
 - b) \$173 (heat included in rent, household pays lights, etc.) or
 - c) \$34.12 (telephone only)

→ Add together J1-J5 **Total shelter costs** J. _____

K. Calculate **shelter deduction**:

(A deduction may be taken for excess shelter costs—shelter costs that are more than half of the adjusted income)

Total shelter costs (J) _____
 Minus
 Half of adjusted income (I÷2) _____
 Equals
 Excess shelter costs _____

→ Enter excess shelter costs on line K

OR

→ If total shelter costs (J) are less than half of the adjusted income (I÷2), you do not get a shelter deduction. Put a 0 on line K.

Shelter deduction K. _____

L. Subtract shelter deduction (K) from adjusted income (I) to get **monthly net income**:

Adjusted Income (I) _____
 Minus
 Shelter Deduction (K) _____
 Equals
 Monthly Net Income (L) _____

Monthly net income L. _____

M. Calculate **monthly food stamp allotment**.

To find food stamp grant amount, look up monthly net income (L) on the food stamp allotment chart (P-2590D). If L is a negative number, look up zero income on the chart.

Monthly Food Stamp Allotment M. _____

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