

**3SquaresVT, Vermont's Supplemental Nutrition Assistance Program  
Income Worksheet for Households**

**WITH a Senior (60 ±) or Person with a Disability**

*Revised September, 2011*

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. \_\_\_\_\_  
(\$147 for HH of 1-3; \$155 for HH of 4; \$181 for HH of 5; \$208 for HH of 6 or more)

F. List the **standard medical expense deduction** of \$138 if claiming between \$35 and \$173 in expenses.  
If expenses are >\$173, list total expenses (total monthly expenses are \_\_\_\_\_ - \$35 = \_\_\_\_\_) F. \_\_\_\_\_

G. List monthly **dependent care costs** G. \_\_\_\_\_

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. \_\_\_\_\_

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) \$757 (household pays all utilities, receives fuel assistance, or heat is included but pays additional for air conditioning) or

b) \$218 (heat included in rent, household pays lights, etc.) or

c) \$36.00 (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 3SquaresVT benefit allotment**.

To find the 3SquaresVT benefit amount, look up monthly net income (L) on the benefit allotment chart (P-2590D also online at <http://dcf.vermont.gov/sites/dcf/files/pdf/esd/rules/B09-26.pdf>). If L is a negative number, look up zero income on the chart.

**Monthly 3SquaresVT benefit Allotment** M. \_\_\_\_\_

