

## MASSACHUSETTS SNAP BENEFITS WORKSHEET (Effective Oct. 2021)

→ COVID extra "Emergency Allotments" currently bring all eligible households to at least maximum SNAP benefit. See <u>MassLegalServices.org/DTA-COVID-19</u> for more.

1.	GROSS Earned Income				
2.	ADD Gross Unearned Income	+			
3.	TOTAL GROSS Monthly income Compare with Gross Income Test	=			
INC	OME DEDUCTIONS				
4.	SUBTRACT Earnings Deduction (20% of gross earnings in Line 1)				
5.	SUBTRACT Standard Deduction HH Size: 1-3 = \$177; 4 = \$184; 5 = \$215; 6+ = \$246				
6.	SUBTRACT Excess Medical Deduction (Se Box A - Elder/Disabled only)	e 			
7.	SUBTRACT Child Support Paid Out+				
8.	SUBTRACT Dependent Care Costs				
9.	SUBTRACT Homeless Deduction (\$160) (only if homeless household not claiming regular Shelter Deduction)				
PRE	PRELIMINARY ADJUSTED =				
NET	INCOME (PANI)				
10.	SUBTRACT Excess Shelter (see Box B) Amount capped at \$597 <b>unless</b> elder/disable person in household!	d			
MO	NTHLY NET INCOME	_			
IVIO	WITE INC INCOVIL				
Γo es	timate APPROXIMATE SNAP benefit:				
1.	Take 30% of Monthly Net Income	<u>X .3</u>			
		=			
2.	Maximum SNAP benefit for Household size (see chart to right)				
3.	SUBTRACT Line 1 (30% of Net)				

## **GROSS INCOME TEST AND MAXIMUM SNAP**

Household Size	Gross Income Test-200% FPL	Maximum SNAP benefit
1	\$2,147	\$ 250
2	\$2,903	\$459
3	\$3,660	\$658
4	\$4,417	\$835
5	\$5,173	\$992
6	\$5,930	\$1,190
7	\$6,687	\$1,316
8	\$7,433	\$1,504
Each add'l member	Add \$757	Add \$188

Box A - Medical Deduction	
Medical Expenses	
Threshold - \$35	- 35
Medical Deduction	<u>=</u> ¤

x If medical deduction > \$35, enter \$155 standard deduction on Item #6. If actual medical expense > \$190/month, then use actual less \$35.

Box B - Shelter Deduction	1	
Rent or home ownership	ocosts	
Add SUA amount*		<u>+</u>
TOTAL shelter expenses		=
Shelter Standard (Divide PANI by 2)		
Excess Shelter Deduction	ı	=
NOTE: Enter maximum \$597 shelter on Line #10 unless elder/disabled person in household, then use actual amount.		

## \*SUA = Standard Utility Allowance:

\$688/mo - heating or AC costs or fuel assistance \$421/mo - utilities only (non-heating/cooling) \$ 48/mo - phone only

NOTE: Households with a member sanctioned due to IPV must meet 130% FPL gross income test, SNAP asset test and 100% FPL net income test. Elder/disabled households over 200% FPL must meet the SNAP asset test and net income test. See MLRI SNAP Advocacy Guide for more information.

<sup>\*\*</sup> This is an *approximate* figure. If 30% of net income is below the max SNAP allotment, you should apply for SNAP. All 1 and 2 person households under 200% FPL qualify for \$20 minimum SNAP.

 $<sup>\</sup>pm$  Also exclude child support paid from gross earnings test, but then include to calculate the value of the 20% earnings deduction.