

**CHILD NUTRITION PROGRAMS - CACFP, NSLP, SBP, SFSP**  
**INCOME ELIGIBILITY GUIDELINES**  
*Effective from July 1, 2022 to June 30, 2023*

Free Meals - 130%					Reduced Price Meals - 185%						
	ANNUAL	MONTHLY	TWICE PER MONTH	BI-WEEKLY	WEEKLY	ANNUAL	MONTHLY	TWICE PER MONTH	BI-WEEKLY	WEEKLY	
1	17,667	1,473	737	680	340	25,142	2,096	1,048	967	484	1
2	<b>23,803</b>	<b>1,984</b>	<b>992</b>	<b>916</b>	<b>458</b>	<b>33,874</b>	<b>2,823</b>	<b>1,412</b>	<b>1,303</b>	<b>652</b>	<b>2</b>
3	29,939	2,495	1,248	1,152	576	42,606	3,551	1,776	1,639	820	3
4	<b>36,075</b>	<b>3,007</b>	<b>1,504</b>	<b>1,388</b>	<b>694</b>	<b>51,338</b>	<b>4,279</b>	<b>2,140</b>	<b>1,975</b>	<b>988</b>	<b>4</b>
5	42,211	3,518	1,759	1,624	812	60,070	5,006	2,503	2,311	1,156	5
6	<b>48,347</b>	<b>4,029</b>	<b>2,015</b>	<b>1,860</b>	<b>930</b>	<b>68,802</b>	<b>5,734</b>	<b>2,867</b>	<b>2,647</b>	<b>1,324</b>	<b>6</b>
7	54,483	4,541	2,271	2,096	1,048	77,534	6,462	3,231	2,983	1,492	7
8	<b>60,619</b>	<b>5,052</b>	<b>2,526</b>	<b>2,332</b>	<b>1,166</b>	<b>86,266</b>	<b>7,189</b>	<b>3,595</b>	<b>3,318</b>	<b>1,659</b>	<b>8</b>
9	66,755	5,564	2,782	2,568	1,284	94,998	7,917	3,959	3,654	1,827	9
10	<b>72,891</b>	<b>6,076</b>	<b>3,038</b>	<b>2,804</b>	<b>1,402</b>	<b>103,730</b>	<b>8,645</b>	<b>4,323</b>	<b>3,990</b>	<b>1,995</b>	<b>10</b>
11	79,027	6,588	3,294	3,040	1,520	112,462	9,373	4,687	4,326	2,163	11
12	<b>85,163</b>	<b>7,100</b>	<b>3,550</b>	<b>3,276</b>	<b>1,638</b>	<b>121,194</b>	<b>10,101</b>	<b>5,051</b>	<b>4,662</b>	<b>2,331</b>	<b>12</b>
13	91,299	7,612	3,806	3,512	1,756	129,926	10,829	5,415	4,998	2,499	13
14	<b>97,435</b>	<b>8,124</b>	<b>4,062</b>	<b>3,748</b>	<b>1,874</b>	<b>138,658</b>	<b>11,557</b>	<b>5,779</b>	<b>5,334</b>	<b>2,667</b>	<b>14</b>
15	103,571	8,636	4,318	3,984	1,992	147,390	12,285	6,143	5,670	2,835	15
	<b>6,136</b>	<b>512</b>	<b>256</b>	<b>236</b>	<b>118</b>	<b>8,732</b>	<b>728</b>	<b>364</b>	<b>336</b>	<b>168</b>	

**A. All applications qualified by income must have:**

1. All household members listed.
2. Income by household member, source and frequency that income is received (Weekly, Monthly, etc.)
3. The last 4 digits of the SSN of the primary wage earner or adult who signs the application or box checked if they do not have a SSN
4. An adult household member's signature.

**B. All applications qualified by SNAP, TAFI or FDPIR number must have:**

1. Name of the child receiving benefits, a correct benefit number; and
2. An adult household member's signature.

**ANNUAL INCOME COMPUTATION**

Multiply:  
**WEEKLY** income by 52  
**EVERY TWO WEEKS** income by 26  
**TWICE MONTHLY** income by 24  
**MONTHLY** income by 12