

**CHILD NUTRITION PROGRAMS - CACFP, NSLP, SBP, SFSP  
INCOME ELIGIBILITY GUIDELINES  
Effective from July 1, 2023 to June 30, 2024**

	Free Meals - 130%					Reduced Price Meals - 185%					
	ANNUAL	MONTHLY	TWICE PER MONTH	BI-WEEKLY	WEEKLY	ANNUAL	MONTHLY	TWICE PER MONTH	BI-WEEKLY	WEEKLY	
1	18,954	1,580	790	729	365	26,973	2,248	1,124	1,038	519	1
2	<b>25,636</b>	<b>2,137</b>	<b>1,069</b>	<b>986</b>	<b>493</b>	<b>36,482</b>	<b>3,041</b>	<b>1,521</b>	<b>1,404</b>	<b>702</b>	<b>2</b>
3	32,318	2,694	1,347	1,243	622	45,991	3,833	1,917	1,769	885	3
4	<b>39,000</b>	<b>3,250</b>	<b>1,625</b>	<b>1,500</b>	<b>750</b>	<b>55,500</b>	<b>4,625</b>	<b>2,313</b>	<b>2,135</b>	<b>1,068</b>	<b>4</b>
5	45,682	3,807	1,904	1,757	879	65,009	5,418	2,709	2,501	1,251	5
6	<b>52,364</b>	<b>4,364</b>	<b>2,182</b>	<b>2,014</b>	<b>1,007</b>	<b>74,518</b>	<b>6,210</b>	<b>3,105</b>	<b>2,867</b>	<b>1,434</b>	<b>6</b>
7	59,046	4,921	2,461	2,271	1,136	87,027	7,003	3,502	3,232	1,616	7
8	<b>65,728</b>	<b>5,478</b>	<b>2,739</b>	<b>2,528</b>	<b>1,264</b>	<b>93,536</b>	<b>7,795</b>	<b>3,898</b>	<b>3,598</b>	<b>1,799</b>	<b>8</b>
9	72,410	6,035	3,018	2,785	1,393	103,045	8,588	4,295	3,964	1,982	9
10	<b>79,092</b>	<b>6,592</b>	<b>3,297</b>	<b>3,042</b>	<b>1,522</b>	<b>112,554</b>	<b>9,381</b>	<b>4,692</b>	<b>4,330</b>	<b>2,165</b>	<b>10</b>
11	85,774	7,149	3,576	3,299	1,651	122,063	10,174	5,089	4,696	2,348	11
12	<b>92,456</b>	<b>7,706</b>	<b>3,855</b>	<b>3,556</b>	<b>1,780</b>	<b>131,572</b>	<b>10,967</b>	<b>5,486</b>	<b>5,062</b>	<b>2,531</b>	<b>12</b>
13	99,138	8,263	4,134	3,813	1,909	141,081	11,760	5,883	5,428	2,714	13
14	<b>105,820</b>	<b>8,820</b>	<b>4,413</b>	<b>4,070</b>	<b>2,038</b>	<b>150,590</b>	<b>12,553</b>	<b>6,280</b>	<b>5,794</b>	<b>2,897</b>	<b>14</b>
15	112,502	9,377	4,692	4,327	2,167	160,099	13,346	6,677	6,160	3,080	15
	<b>6,682</b>	<b>557</b>	<b>279</b>	<b>257</b>	<b>129</b>	<b>9,509</b>	<b>793</b>	<b>397</b>	<b>366</b>	<b>183</b>	
<b>A. All applications qualified by income must have:</b> 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>ANNUAL INCOME COMPUTATION</b> Multiply: <b>WEEKLY</b> income by 52 <b>EVERY TWO WEEKS</b> income by 26 <b>TWICE MONTHLY</b> income by 24 <b>MONTHLY</b> income by 12			
<b>B. All applications qualified by SNAP, TAFI or FDPIR number must have:</b> 1. Name of the child receiving benefits, a correct benefit number; and 2. An adult household member's signature.											

This Institution is an equal opportunity provider.