

MASSACHUSETTS SNAP BENEFITS WORKSHEET

Effective October 1, 2023

1. GROSS Earned Income _____
(exclude any legally obligated child support paid out)
2. ADD Gross Unearned Income + _____
3. TOTAL GROSS Monthly income = _____
Compare with Gross Income Test

INCOME DEDUCTIONS

4. SUBTRACT 20% of Line 1 Earned Income - _____
(if legally obligated child support paid out from earnings, first add back in for 20% calc)
5. SUBTRACT Standard Deduction - _____
Household Size: 1-3 = \$198;
4 = \$208; 5 = \$244; 6+ = \$278
6. SUBTRACT Excess Medical Deduction (See Box A) - _____
7. SUBTRACT Dependent Care Costs - _____
8. SUBTRACT Homeless Deduction (\$180) - _____
(only if homeless household not claiming regular Shelter Deduction)

PRELIMINARY ADJUSTED

NET INCOME (PANI)

9. SUBTRACT Excess Shelter (see Box B) - _____
Amount capped at \$672 unless 60+/disabled person in household!

MONTHLY NET INCOME

To estimate APPROXIMATE SNAP benefit:

1. Take 30% of Monthly Net Income X .3 _____
= _____
2. Maximum SNAP benefit for Household size (see chart to right) _____
3. SUBTRACT Line 1 (30% of Net) - _____

APPROX. MONTHLY SNAP**

** This is an *approximate* figure. We encourage all households with income below 200% FPL to apply for SNAP. All 1 and 2 person households under 200% FPL qualify for \$23 minimum SNAP.

GROSS INCOME TEST AND MAXIMUM SNAP

Household Size	Gross Income Test-200% FPL	Maximum SNAP benefit
1	\$2,430	\$291
2	\$3,287	\$535
3	\$4,143	\$766
4	\$5,000	\$973
5	\$5,857	\$1,155
6	\$6,713	\$1,386
7	\$7,570	\$1,532
8	\$8,427	\$1,751
Each add'l member	+ \$857	+ \$219

Box A - Medical Deduction

Medical Expenses	_____
Threshold - \$35	- 35
Medical Deduction	= _____

⌘ 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

Rent or home ownership costs	_____
Add SUA amount*	+ _____
TOTAL shelter expenses	= _____
Shelter Standard (Divide PANI by 2)	- _____
Excess Shelter Deduction	= _____

NOTE: Enter maximum \$624 shelter on Line #10 unless 60+/disabled person in household, then use actual amount.

*SUA = Standard Utility Allowance:

\$852/mo – heating or AC costs or fuel assistance
\$520/mo - non-heating/cooling utilities
\$ 69/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. 60+/disabled households over 200% FPL must meet the asset test and net income test. See [MLRI SNAP Advocacy Guide](#) for more information.