

CALFRESH BUDGET WORKSHEET/SEMI-ANNUAL REPORTING HOUSEHOLDS

CASE NAME	COMPANION CASE REFERENCE	CASE NUMBER	CLASSIFICATION <input type="checkbox"/> NA <input type="checkbox"/> PA <input type="checkbox"/> MIXED <input type="checkbox"/> TC
CERTIFICATION PERIOD FROM _____ THROUGH _____	BUDGET IS BASED ON: SAR 7 <input type="checkbox"/>	MID-CERTIFICATION PERIOD REPORT <input type="checkbox"/>	OTHER <input type="checkbox"/> RECERTIFICATION <input type="checkbox"/>

INSTRUCTIONS:

List the amount of Reasonably Anticipated Income on line 1a. Reasonably Anticipated Income is the specified amount of monthly income the household and CWD are reasonably certain the household will receive in the SAR payment period. Use the worksheet under 1b to average income for those households that elect to or are required to have their income averaged.

PART 1 - GROSS INCOME

A. NONEXEMPT GROSS UNEARNED INCOME

1a. Reasonably Anticipated Income \$ _____

1b. Income Averaging (use worksheet below)

	<u>SOCIAL SECURITY, UIB, DIB, PENSIONS</u>	<u>CHILD/SPOUSAL SUPPORT</u>	<u>SCHOLARSHIPS, GRANTS, LOANS</u>	<u>OTHER</u>
Month 1/Year _____ / _____	\$ _____	\$ _____	\$ _____	\$ _____
Month 2/Year _____ / _____	\$ _____	\$ _____	\$ _____	\$ _____
Month 3/Year _____ / _____	\$ _____	\$ _____	\$ _____	\$ _____
Month 4/Year _____ / _____	\$ _____	\$ _____	\$ _____	\$ _____
Month 5/Year _____ / _____	\$ _____	\$ _____	\$ _____	\$ _____
Month 6/Year _____ / _____	\$ _____	\$ _____	\$ _____	\$ _____
Total Unearned Income				\$ _____
Averaged Gross Unearned Income (total unearned + number of month)				\$ _____

- 2. Monthly Income Amount From 1a (or 1b if appropriate) \$ _____ (A2)
- 3. Cash Aid \$ _____ (A3)
- 4. Less Child Support Paid (enter any remainder in B3) \$ _____ (A4)
- 5. Total Gross Unearned Income (A2 + A3 - A4) **Total** \$ _____ (A5)

B. NONEXEMPT GROSS EARNED INCOME

1a. Reasonably Anticipated Income \$ _____

1b. Income Averaging (use worksheet below)

	<u>GROSS SALARY/WAGES</u>	<u>SELF EMPLOYMENT</u>	<u>TRAINING ALLOWANCES</u>
Month 1/Year _____ / _____	\$ _____	\$ _____	\$ _____
Month 2/Year _____ / _____	\$ _____	\$ _____	\$ _____
Month 3/Year _____ / _____	\$ _____	\$ _____	\$ _____
Month 4/Year _____ / _____	\$ _____	\$ _____	\$ _____
Month 5/Year _____ / _____	\$ _____	\$ _____	\$ _____
Month 6/Year _____ / _____	\$ _____	\$ _____	\$ _____
Total Gross Earned Income			\$ _____
Averaged Gross Unearned Income (total gross earned income + number of months)			\$ _____

- 2. Monthly Income Amount From 1a (or 1b if appropriate) \$ _____ (B2)
- 3. Less Remainder of Child Support Paid (if not fully used in Section A) \$ _____ (B3)
- 4. Total Gross Earned Income (B2 - B3) **Total** \$ _____ (B4)

PART 2 - GROSS INCOME

C. GROSS INCOME TEST FOR HOUSEHOLDS WITH NO ELDERLY OR DISABLED MEMBERS

- 1. Maximum Gross Income allowed for Household Size of _____ (from table) \$ _____
- 2. Total Gross Income (A5 + B4) = \$ _____
- 3. Gross Income Eligible? (Is C2 less than or equal to C1?) YES NO

PART 3 - NET INCOME**D. NONEXEMPT GROSS INCOME**

- 1. Gross Earned Income (B2) \$ _____
- 2. Adjusted Gross Earned Income (80% of D1) \$ _____
- 3. Less Remainder of Child Support Paid (B3)
(if not fully used in Section A) \$ _____
- 4. Total Gross Earned Income (D2 - D3)
(If negative amount, enter zero) \$ _____
- 5. Total Gross Unearned Income (A5) \$ _____
- 6. Nonexempt Gross Income (D4 + D5) \$ _____

E. STANDARD

Standard Deduction \$ _____

F. DEPENDENT CARE (100% OF COSTS)

\$ _____

G. HOMELESS SHELTER DEDUCTION

\$ _____

H. TOTAL DEDUCTIONS (E + F + G)

\$ _____

I. ADJUSTED NET INCOME

- 1. Nonexempt Gross Income (D6) \$ _____
- 2. Total Deductions (Line H) \$ _____
- 3. Adjusted Net Income (I1 - I2) \$ _____

J. SHELTER DEDUCTION

- 1. Total Housing Costs \$ _____
- 2. Total Utility Allowance \$ _____
- 3. Total Shelter costs \$ _____
- 4. Allowable Shelter costs (50% of I3) \$ _____
- 5. Excess Shelter costs (J3 - J4) \$ _____
- 6. Maximum Allowance For Shelter \$ _____
- 7. Allowable Shelter Deduction (Lesser of J5 or J6) \$ _____

K NET MONTHLY INCOME (I3 - J7)

\$ _____

L. NET INCOME TEST

- 1. Household Size _____
- 2. Maximum Net Income Allowable (from table) \$ _____
- 3. Net Income eligible YES NO

PART 4—INCOME COMPUTATIONS**PAYMENT PERIOD****M. SELF-EMPLOYMENT (Nonexempt Resources Only)**

- 1. Gross Income from Self-Employment \$ _____
- 2. Expenses: Standard 40% Deduction
 Actual Expenses (Verification Required) \$ _____
- 3. Total Nonexempt Income from Self-Employment (M1 - M2) \$ _____
If averaging self-employment income go to M7. If adjusting a previous average, continue to M4.
- 4. Adjustment to Gross Income \$ _____
- 5. Adjustment to Expenses \$ _____
- 6. Adjusted Self-Employment Income (M3 + M4 + M5) \$ _____
- 7. Monthly Self-Employment Income (M3 or M6 ÷ number of months income covers) \$ _____

N. EDUCATIONAL GRANTS, SCHOLARSHIPS AND LOANS**PAYMENT PERIOD**

- 1. Income from Grants, Scholarships or Loans \$ _____
- 2. Tuition and Mandatory Fees \$ _____
- 3. Total Nonexempt Educational Income (N1 - N2) \$ _____
- 4. Monthly Income from Grants, Scholarships or Loans (N3 ÷ number of months income covers) \$ _____

PART 5—REPORTED CHANGES (Other than the SAR 7 or CF 377.5 SAR)

Type of Change					
Date Change Occurred					
Date Change Reported					
EW Initials					