

# **INCOME ELIGIBILITY GUIDELINES**

**July 1, 2019 – June 30, 2020**

(As announced by the United States Department of Agriculture)

Form # 127 Revised 3/2019

## **FREE MEALS OR MILK REDUCED PRICE MEALS**

<b>Household Size</b>	<b>Annual</b>	<b>Monthly</b>	<b>Twice per Month</b>	<b>Every Two Weeks</b>	<b>Weekly</b>
1	\$ 23,107	\$ 1,926	\$ 962.77	\$ 889	\$ 444
2	\$ 31,284	\$ 2,607	\$ 1,303	\$ 1,203	\$ 602
3	\$ 39,461	\$ 3,288	\$ 1,644	\$ 1,518	\$ 759
4	\$ 47,638	\$ 3,970	\$ 1,985	\$ 1,832	\$ 916
5	\$ 55,815	\$ 4,651	\$ 2,326	\$ 2,147	\$ 1,073
6	\$ 63,992	\$ 5,333	\$ 2,666	\$ 2,461	\$ 1,231
7	\$ 72,169	\$ 6,014	\$ 3,007	\$ 2,776	\$ 1,388
8	\$ 80,346	\$ 6,695	\$ 3,348	\$ 3,090	\$ 1,545
<b>Each Additional Household Member</b>	\$ 8,177	\$ 681	\$ 341	\$ 315	\$ 157