KANSAS DEPARTMENT FOR CHILDREN AND FAMILIES

INCOME ALLOWANCE DETERMINATION FORM

Applicant/Recipient Name						
Name of Spouse						
Case Number						
amount of the community	determine the total amount of income recesspouse and/or family member income allontable income below. (Attach additional st	owance.				
SECTION I - INCOME						
A. EARNED INCOME - L	ist all earned income including self-emplo	yment income.				
Source 1.	Wage Earner	Monthly Gross (or Adjusted Gross for Self-employment)				
B. UNEARNED INCOME – List all unearned income. Examples: alimony, unemployment insurance, royalties, dividends, rent, mortgage, sales contract income, military or VA benefit, retirement pension, worker's compensation, etc. If income received jointly, list both spouses' names.						
Source	Spouse(s) Receiving Income	Monthly Gross				
1						
2						
3.						
4.						
5.						
6.						

B. UNEARNED INCOME (CONTINUED)

9.		
10.		
C. INC	OME TOTALS – Total all earned and unearned income from page 1 a	nd list below.
1.	Income Received by Wife	\$
2.	Income Received by Husband	\$ <u>+</u>
3.	Income Received Jointly	\$ _+
4.	Total Income of Couple	\$ _ =
	tal income is less than or equal to \$1,939 go to Section III. If total incor	ne is greater
SECTION	n \$1,939 complete Section II first. ON II – SHELTER EXPENSES Inthly shelter expenses below for the community spouse and compute in the community spouse in the community spouse and compute in the community spo	the excess shelter
SECTIO	ON II – SHELTER EXPENSES In the community spouse and compute to t	
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SECTION LIST MODERNING TO SECURITION SECURIT	DN II – SHELTER EXPENSES Inthly shelter expenses below for the community spouse and compute in the community spouse in the community spouse in the community spouse in the community spouse in the community spou	\$
ist mo amount 1.	nthly shelter expenses below for the community spouse and compute it. Rental Cost Mortgage Payment	\$ \$
List mo amount 1. 2. 3.	DN II – SHELTER EXPENSES In the community spouse and compute state of the community spouse state of the community spous	\$ \$
List mo amount 1. 2. 3. 4.	DN II – SHELTER EXPENSES Inthly shelter expenses below for the community spouse and compute in the community spouse and community spou	\$\$
List mo amount 1. 2. 3. 4.	nthly shelter expenses below for the community spouse and compute :: Rental Cost Mortgage Payment Property Taxes (if not included in item 2 above) Home Insurance (if not included in item 2 above) Other (Condominium/Cooperative charges)	\$\$\$\$\$\$\$\$

SECTION III - COMMUNITY SPOUSE INCOME ALLOWANCE

Total Qualifying Members

The community spouse may retain up to \$1,939 per month of the couple's total income. The community spouse's share can be increased by the amount of excess shelter expense calculated above. In any event, the maximum community spouse income allowance is \$2,898 per month.

Calculate the total amount of income which can be allocated to the community spouse

1.	\$1,939 minimum allowance	e	\$	
2.	Total excess shelter (Line	II-6)	\$	+
3.	Total allowable community	spouse allowance	\$	=
4.	Community spouse's gross	s income	\$	
5.			 \$	=
CTIO	N IV – FAMILY INCOME A	LLOWANCE		
ne sp 939. ily m er of the	pouse in long term care as long term care as long the income is in excess contember is defined as a mino either spouse. It is a spouse in long term care as long term in embers, and it is a spouse.	ong as that member's gross monthly of \$1,939 no income allowance can r or dependent child, dependent par	y income do be provided rent, or dep	oes not exceed d to that member. A pendent brother or
<u>Nar</u>	<u>ne</u>	<u>Dependency</u>	Amount Gross In	
	2. 3. 4. 5. ctio	 Total excess shelter (Line Total allowable community Community spouse's gross Net community spouse incorprovided TION IV – FAMILY INCOME A the family member who lives with le spouse in long term care as led in spouse. 	2. Total excess shelter (Line II-6) 3. Total allowable community spouse allowance 4. Community spouse's gross income 5. Net community spouse income allowance which can be provided CTION IV – FAMILY INCOME ALLOWANCE the family member who lives with the community spouse can receive the spouse in long term care as long as that member's gross monthly 39. If the income is in excess of \$1,939 no income allowance can ly member is defined as a minor or dependent child, dependent pair of either spouse. The dependent family members, type of dependency (minor child, descriptions income for each below.	2. Total excess shelter (Line II-6) \$ 3. Total allowable community spouse allowance \$ 4. Community spouse's gross income \$ 5. Net community spouse income allowance which can be provided \$ ETION IV – FAMILY INCOME ALLOWANCE The family member who lives with the community spouse can receive \$647 per receive spouse in long term care as long as that member's gross monthly income downward in the income is in excess of \$1,939 no income allowance can be providedly member is defined as a minor or dependent child, dependent parent, or dependent either spouse. The dependent family members, type of dependency (minor child, disabled, etc.) the dependent family members, type of dependency (minor child, disabled, etc.) Amount

Page 4					
Calcula	te the total amount of income which can be allocated to each family me	mbe	er.		
1.	Monthly income allowance per family member \$ = 64		= 647		
2.	Number of qualifying family members	\$	Х		
3.	Total family allowance which can be provided	\$_	+		
SECTION V – SHARE OF INCOME FOR SPOUSE IN LONG-TERM CARE Calculate the institutionalized spouse's share of the total non-exempt income.					
1.	Total income of the institutionalized spouse	\$			
2.	Income to be allocated to the community spouse	\$			
3.	Income to be allocated to other family members	\$			
4.	Institutionalized spouse's share of total income	\$_	=		
SECTION	ON VI – TOTAL ALLOCATION				
	on the total allowance amount(s) which can be provided as indicated ab will be allocated as follows:	ove	e, the couple's		
1.	Community spouse's share of total income	\$			

	1.	Community spouse's share of total income	\$	
	2.	Spouse in long-term care share of total income	\$	+
	3.	Family member(s) share of total income	\$	+
	4.	Total income of couple	\$	=
		(Should be same as Section I, Line C-4 above)	-	
Per	son (Completing Form		
Sig	natur	e		
Dat	e Fo	rm Completed		