





8a. Total annual income: copy from 7i			\$	8a.
Permissive Deductions			1075	
8b. Family Member Name	No.	8c. Type of permissive deduction	8d. Amou	Int
			S	
			S	
			S	
			S	
			S	
			S	
8e. Total permissive deductions (sum o	of column	Bd)	S	8e.
If head/spouse/co-head is under 62 a				
8f. Medical/disability threshold: 8a X 0.1			\$	8f.
		ce expense (if no disability expenses, skip to 8k)	\$	8g.
8h. Maximum disability allowance: If 8g			\$	8h.
		ative and head/spouse/co-head is under 62 and not	\$	8h.
	disab	led, put 0		
	If neg	ative and head/spouse/co-head is elderly or disabled, copy	\$	8h.
	from	8g		
8i. Earnings in 7d made possible by dis	ability ass	istance expense	\$	8i.
8j. Allowable disability assistance expe	nse: lower	of 8h or 8i (if 8g is less than 8f and head/spouse/co-head	\$	8j.
elderly or disabled, copy from 8h)			2.225	
8k. Total annual unreimbursed health/n	nedical ex	penses (if head/spouse/co-head under 62 and not disabled,	\$	8k.
put 0)				
8I. Family is eligible for medical or child care expense hardship or both?				81.
		al expense: 8j + 8k (if no disability expenses, copy from 8k)	\$	8m.
8n. Medical/disability assistance		disability assistance expenses or if 8g is less than 8f, put	\$	8n.
deduction:		inus 8f (if 8m minus 8f is negative, put zero)		
		ability assistance expenses and 8g is greater than or equal	\$	8n.
	to 8f,	copy from 8m		
8p. Elderly/disability allowance			S	8p.
	ler 18 or	with disability, or full-time student. Do not count head of		8q.
household, spouse, co-head, foster child				oq.
8r. Allowance per dependent	a addit, Of	inte-infunde.)	s	8r.
8s. Dependent allowance: 8g X 8r			S	8s.
8t. Total annual unreimbursed child car	e costs		s	8t.
8x. Total allowances: 8e + 8n + 8p + 8s			S	8x.
8y. Adjusted annual income: 8a minus		larger put ()	S	8y.

FAMILY

- Includes all household members except live-in aides and foster children/adults
 - Use the number of family members to calculate subsidies and payments

HOUSEHOLD

- Includes everyone who lives in the unit, as well as foster children/adults and live-in aides
 - Household members are used to determine unit size

ELIGIBILITY FOR DEDUCTIONS & ALLOWANCES

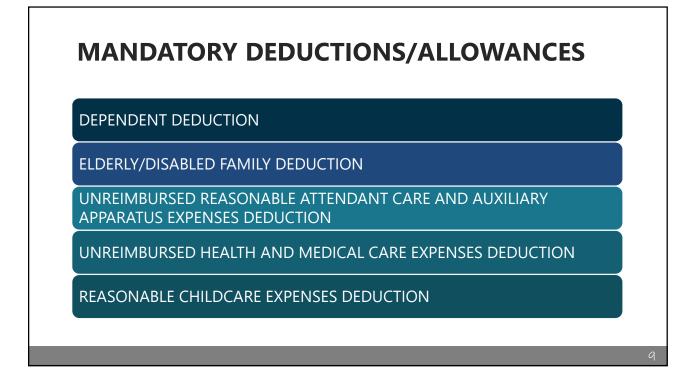
- → Persons whose incomes are not counted in the Part 5 Definition of annual income are not considered family members – even if they live in the same household – and cannot qualify a family for deductions or allowances when calculating adjusted income
- → These include live-in aides, children of live-in aides, and foster children/foster adults

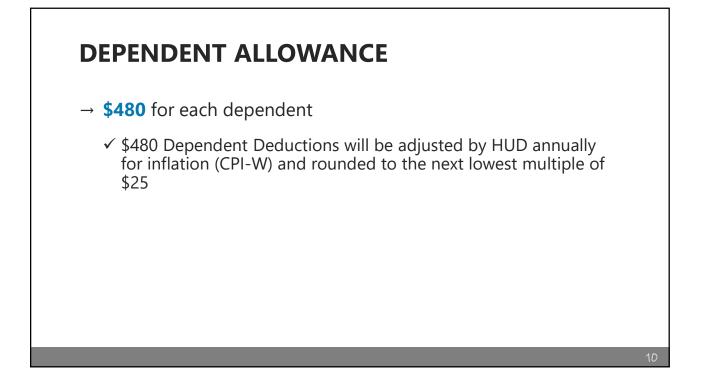
ADJUSTED ANNUAL INCOME

→ From Annual Income, subtract total allowances and deductions to determine Annual Adjusted Income

PLEASE NOTE.....

- → Per 2023-27.....
- → PHAs must continue to follow their existing ACOPs and Admin Plans until the PHA's software is compliant with the Housing Information Portal (HIP)

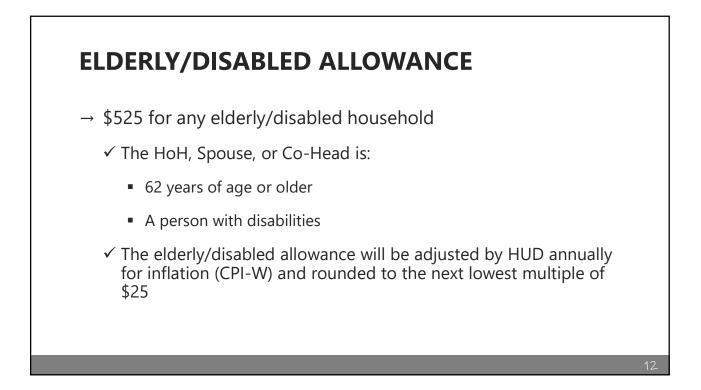






DEPENDENT ALLOWANCE

- \rightarrow Dependents are family members who are:
 - ✓ Under 18 years of age
 - ✓ A person with a disability regardless of age
 - ✓ A full-time student regardless of age
- → The head of household, spouse/co-head, foster children/adults, live-in aides and families of live-in aides are never dependents



UNREIMBURSED EXPENSES

HEALTH & MEDICAL CARE

- → Unreimbursed Medial Expenses will now be known as "Unreimbursed Health and Medical Care Expenses," **and**
- → Disability Assistance Expenses will now be known as "Unreimbursed Reasonable Attendant Care and Auxiliary Apparatus Expenses"
 - ✓ Collectively unreimbursed health and medical care expenses

UNREIMBURSED EXPENSES

HEALTH & MEDICAL CARE

- → **NEW** Definition for Health and Medical Care Expenses
 - ✓ Costs incurred for the diagnosis, cure, mitigation, treatment, or prevention of disease or payments for treatments affecting any structure or function of the body

UNREIMBURSED EXPENSES

HEALTH & MEDICAL CARE

- \rightarrow Deduction increased from **3%** to **10%**
 - \checkmark Cannot exceed total household income
- $\rightarrow\,$ Regulations provide financial hardship exemptions for eligible families due to the increase in threshold

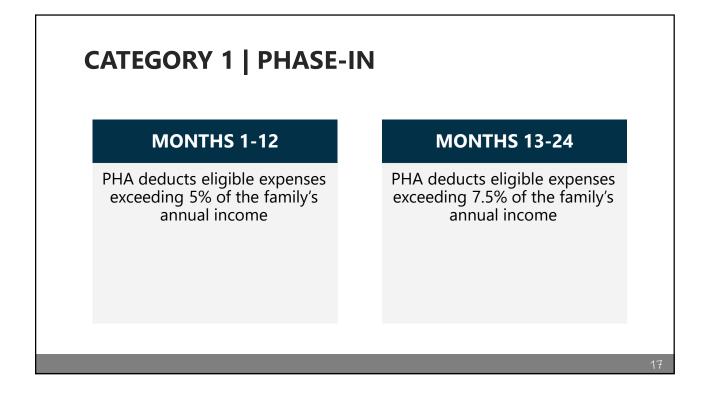
TWO CATEGORIES OF HARDSHIP EXEMPTIONS

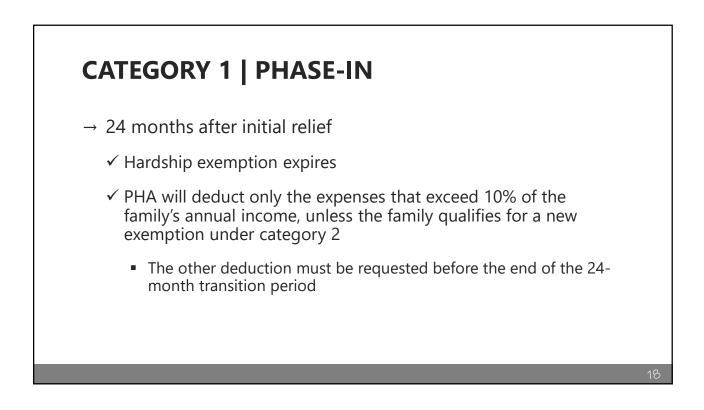
PHASED-IN RELIEF

Families already receiving a health and medical deduction based on their most recent income review **PRIOR TO** January 1, 2024

GENERAL

Families that can demonstrate that medical or disability assistance expenses increased, or hardship is result of a change in circumstances that would not otherwise trigger an interim reexam





EXAMPLE | CATEGORY 1 PRIOR TO JANUARY 1, 2024 - 3% THRESHOLD

Eld	erly/Disabled Household
Annual Income	\$18,000
Medical Expense	\$4,800
А	nnual Adjusted Income
Medical Expense Threshold	\$18,000 x 3% = \$540
Medical Expense Deduction	\$4,800 - \$540 = \$4,260
Elderly/Disabled Allowance	\$525
Total Adjusted Income	\$4,260 + \$525 = \$4,785
Annual Adjusted Income	\$18,000 - \$4,785 = \$13,215
Adjusted Monthly Income	\$13,215 ÷ 12 = \$1,101
TTP	\$1,101 x 30% = <mark>\$330</mark>

EXAMPLE | CATEGORY 1 YEAR 1 - 5% PHASE-IN

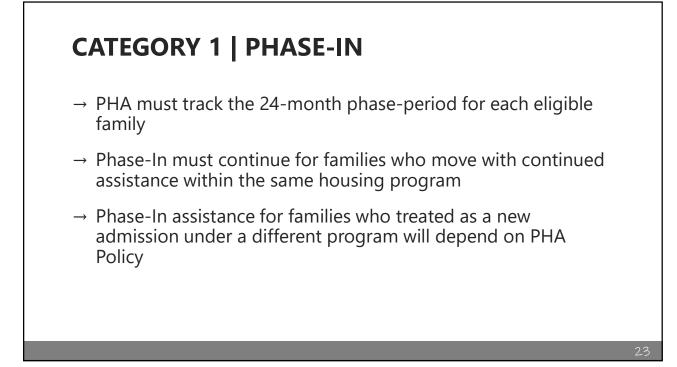
Elde	rly/Disabled Household
Annual Income	\$18,000
Medical Expense	\$4,800
Ar	nual Adjusted Income
Medical Expense Threshold	\$18,000 x 5% = \$900
Medical Expense Deduction	\$4,800 - \$900 = \$3,900
Elderly/Disabled Allowance	\$525
Total Adjusted Income	\$3,900 + \$525 = \$4,425
Annual Adjusted Income	\$18,000 - \$4,425 = \$13,575
Adjusted Monthly Income	\$13,575 ÷ 12 = \$1,131
TTP	\$1,131 x 30% = <mark>\$339</mark>

EXAMPLE | CATEGORY 1 YEAR 2 - 7.5% PHASE-IN

El	derly/Disabled Household
Annual Income	\$18,000
Medical Expense	\$4,800
	Annual Adjusted Income
Medical Expense Threshold	\$18,000 x 7.5% = \$1,350
Medical Expense Deduction	\$4,800 - \$1,350 = \$3,450
Elderly/Disabled Allowance	\$525
Total Adjusted Income	\$3,450 + \$525 = \$3,975
Annual Adjusted Income	\$18,000 - \$3,975 = \$14,025
Adjusted Monthly Income	\$14,025 ÷ 12 = \$1,169
TTP	\$1,169 x 30% = \$351

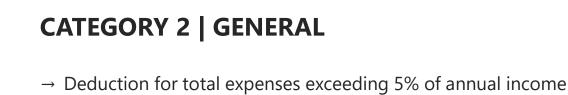
EXAMPLE | CATEGORY 1 YEAR 3 – 10% THRESHOLD

¢10.000
\$18,000
\$4,800
Adjusted Income
\$18,000 x 10% = \$1,800
\$4,800 - \$1,800 = \$3,000
\$525
\$3,000 + \$525 = \$3,525
\$18,000 - \$3,525 = \$14,475
\$14,475 ÷ 12 = \$1,206
\$1,206 x 30% = \$362



CATEGORY 2 | GENERAL

- → A family may request a financial hardship exemption due to increase in the unreimbursed medical expenses or a change in circumstances that would not otherwise trigger an interim reexamination
- → Available regardless of whether family previously received health and medical expense deduction, are currently receiving phase-in relief, or were previously eligible for general or phase-in relief



- \rightarrow Relief ends (the soonest of):
 - ✓ When the circumstances that made the family eligible for the relief are no longer applicable, or
 - ✓ After 90 days
 - PHAs may extend the relief for one or more additional 90 days while the hardship condition continues



- → Families may request hardship exemption under category 2
 - \checkmark Prior to the end of the 24 months transition period
 - ✓ If determined eligible for hardship relief under category 2, the hardship relief under category 1 ends
 - The family would receive a deduction for their qualifying expenses over 5% of their annual income instead of 7.5% of annual income

EXAMPLE | CATEGORY 2 10% THRESHOLD

\$18,000 \$4,800 come 0 x 10% = \$1,800
come
0 x 10% = \$1,800
- \$1,800 = \$3,000
+ \$525 = \$3,525
0 - \$3,525 = \$14,475
5 ÷ 12 = \$1,206
7

EXAMPLE | CATEGORY 2 QUALIFY FOR 90-DAY RELIEF – 5%

Elde	rly/Disabled Household
Annual Income	\$18,000
Medical Expense	\$4,800
Ar	nnual Adjusted Income
Medical Expense Threshold	\$18,000 x 5% = \$900
Medical Expense Deduction	\$4,800 - \$900 = \$3,900
Elderly/Disabled Allowance	\$525
Total Adjusted Income	\$3,900 + \$525 = \$4,425
Annual Adjusted Income	\$18,000 - \$4,425 = \$13,575
Adjusted Monthly Income	\$13,575 ÷ 12 = \$1,131
TTP	\$1,131 x 30% = \$339

CATEGORY 2 | GENERAL

- → PHA must establish written policies regarding the types of circumstances that qualifies a family for financial hardship under Category 2
 - Must specify when such deductions may be eligible for additional 90-day extensions

CHILDCARE EXPENSE DEDUCTION

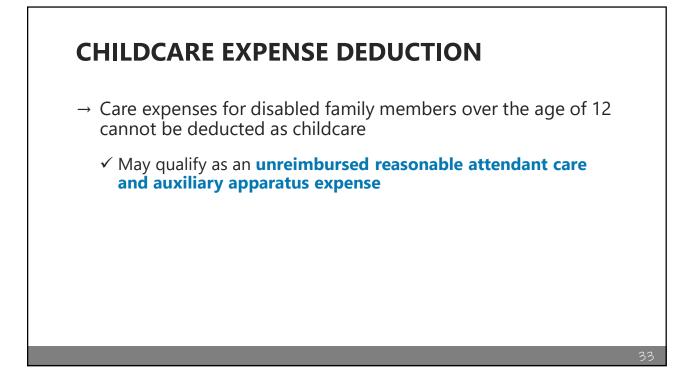
- → Unreimbursed reasonable childcare costs for children under age 13, including foster children, necessary to :
 - ✓ Be employed,
 - ✓ Seek employment; or
 - ✓ Further their education

CHILDCARE EXPENSE DEDUCTION

- → If the cost is to allow a family member to work, the deduction cannot exceed the earnings included in income
- → The person enabled to work **may be defined by the PHA** in ACOP/Admin Plan as the one who earns the least unless it is obvious that another household member is enabled to work

CHILDCARE EXPENSE DEDUCTION

- → If the expense is required to further education, the PHA will consider the reasonable expense incurred while attending school and traveling to and from school
 - \checkmark No income threshold for seeking employment or furthering education





CHILDCARE EXPENSE DEDUCTION

- \rightarrow A family may request a financial hardship exemption to continue the childcare expense deduction
- \rightarrow The family must demonstrate to the PHA's satisfaction:
 - ✓ Their inability to pay their rent as a result of the loss of the childcare deduction, and
 - ✓ The childcare deduction is still necessary even though the family member is no longer employed or furthering their education

HARDSHIP EXEMPTION CHILDCARE EXPENSE DEDUCTION

- \rightarrow Form and duration of relief
 - ✓ Up to 90 days
 - ✓ The exemption my be extended, at the PHA's discretion, for an additional 90-day periods based on the family's circumstances
 - ✓ The PHA may terminate the hardship exemption if the PHA determines that the family no longer needs the hardship exemption

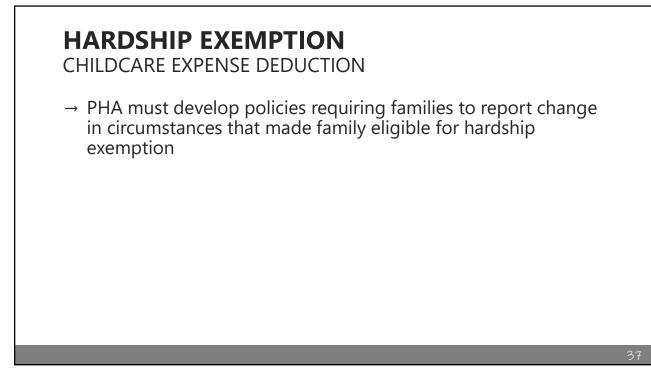
EXAMPLE | HARDSHIP EXEMPTION

CHILDCARE EXPENSE DEDUCTION

→ Tracy has been paying \$250 per week for her child to attend day care while she was employed. She loses her job and plans to enroll in college in 2 months. The day care has a long waiting list, and if Tracy removes her child, even temporarily, she will lose her spot in the day care and not have reliable childcare when she starts college. Continuing to pay the childcare expense while not receiving her earned income has left the family unable to pay their rent.

 \rightarrow Will Tracy qualify for the Hardship Exemption? **YES**

→ If yes, for how long? **Up to 90 Days**



HARDSHIP POLICY REQUIREMENTS

- → PHA must establish policies on how it defines what constitutes a hardship for determining eligibility for general hardship relief for health and medical expense deductions and childcare expense hardship exemption
- → Examples include:
 - ✓ Unanticipated large medical bills
 - ✓ Rent, utilities, and applicable expense exceed a certain percentage of the family's adjusted income

FAMILY NOTIFICATION OF HARDSHIP EXEMPTION

- → The PHA must promptly notify the family in writing of the change in determination of adjusted income and the family's rent resulting from the hardship exemption
- \rightarrow The notice must also inform the family:
 - ✓ When the hardship exemption will begin and expire
 - ✓ Requirement for family to report if circumstances no longer exist

FAMILY NOTIFICATION OF HARDSHIP EXEMPTION

- → PHA must promptly notify family in writing if hardship exemption is:
 - ✓ Denied; or
 - ✓ Terminated

REPORTING HARDSHIP EXEMPTIONS

- → If the addition, removal, of updating of the Phase-In Relief, General Hardship Relief, or Childcare Hardship Exemption does not trigger an Interim Reexamination, the PHA will report it on the 50058 as:
 - ✓ Other Change, Non-Income Threshold



Family	Age	Annual Income	Unreimbursed Medical Expenses	Unreimbursed Disability Assistance Expenses	Childcare
НоН	61	\$25,000 wages	\$2,000		\$2,000 (for grandson)
Spouse (disabled)	52	\$6,000 SSI	-	\$3,500 To provide spouse attendant care to allow HoH to work	
Son	28	-	\$1,000	-	-
Grandson	4	-	-	-	-

8. Deductions and Allowances					
8a. Total annual income: copy from 7i			\$	31,000	8a.
Permissive Deductions			-		
8b. Family Member Name	No.	8c. Type of permissive deduction		Amount	
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
 Total permissive deductions (sum of the second secon			\$		8e.
If head/spouse/co-head is under 62 a		nily member is disabled, skip to 8l			
8f. Medical/disability threshold: 8a X 0.			\$	3,100	8f.
		ce expense (if no disability expenses, skip to 8k)	\$	3,500	8g.
 Maximum disability allowance: If 8g 			\$	400	8h.
		ative and head/spouse/co-head is under 62 and not led, put 0	\$		8h.
	If neg from	ative and head/spouse/co-head is elderly or disabled, copy	\$		8h
8i. Earnings in 7d made possible by dis			\$	25,000	8i.
		of 8h or 8i (if 8g is less than 8f and head/spouse/co-head	\$	400	8j.
	nedical ex	penses (if head/spouse/co-head under 62 and not disabled,	\$	3,000	8k.
81. Family is eligible for medical or child	care expe	nse hardship or both?	1		81.
		al expense: 8j + 8k (if no disability expenses, copy from 8k)	\$	3,400	8m.
8n. Medical/disability assistance deduction:	If no d	disability assistance expenses or if 8g is less than 8f, put inus 8f (if 8m minus 8f is negative, put zero)	\$	5,400	8n.
	If disa	ability assistance expenses and 8g is greater than or equal copy from 8m	\$	3,400	<mark>8n</mark> .
8p. Elderly/disability allowance			\$	525	8p.
8q. Number of dependents (people und household, spouse, co-head, foster child		with disability, or full-time student. Do not count head of live-in aide.)		1	8q
8r. Allowance per dependent			\$	480	8r.
8s. Dependent allowance: 8g X 8r			\$	480	8s.
8t. Total annual unreimbursed child car	e costs		\$	2.000	8t.
8x. Total allowances: 8e + 8n + 8p + 8s			\$	6.405	8x.
8y. Adjusted annual income: 8a minus		larger put ()	\$	24.595	8y.

Family	Age	Annual Income	Unreimbursed Medical Expenses	Unreimbursed Disability Assistance Expenses	Childcare
НоН	61	\$25,000 wages	\$2,000		\$2,000 (for grandson)
Spouse (disabled)	52	\$6,000 SSI	-	\$3,500 To provide spouse attendant care to allow HoH to work	
Son	28	-	\$1,000	-	-
Grandson	4	-	-	-	-

8a. Total annual income: copy from 7i			\$	31.000	8a.
Permissive Deductions	- 19				
8b. Family Member Name	No.	8c. Type of permissive deduction	8d.		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
Total permissive deductions (sum of the sum of			\$		8e.
If head/spouse/co-head is under 62 a		nily member is disabled, skip to 8l			
8f. Medical/disability threshold: 8a X 0.			\$	1,550	8f.
		ce expense (if no disability expenses, skip to 8k)	\$	3,500	8g.
8h. Maximum disability allowance: If 8g			\$	1,950	8h.
		ative and head/spouse/co-head is under 62 and not led, put 0	\$		8h.
	If neg	ative and head/spouse/co-head is elderly or disabled, copy	\$		8h
8i. Earnings in 7d made possible by dis			\$	25,000	8i.
		of 8h or 8i (if 8g is less than 8f and head/spouse/co-head	\$	1,950	8 j.
	nedical ex	penses (if head/spouse/co-head under 62 and not disabled,	\$	3,000	8k.
81. Family is eligible for medical or child	care expe	ense hardship or both?		v	81.
		al expense: 8j + 8k (if no disability expenses, copy from 8k)	\$	4,950	8m.
8n. Medical/disability assistance deduction:	If no d	disability assistance expenses or if 8g is less than 8f, put inus 8f (if 8m minus 8f is negative, put zero)	\$	1,000	8n.
	If disa	ability assistance expenses and 8g is greater than or equal copy from 8m	\$	4,950	<mark>8</mark> n.
8p. Elderly/disability allowance			\$	525	8p.
8q. Number of dependents (people und household, spouse, co-head, foster child		with disability, or full-time student. Do not count head of live-in aide.)		1	8q
8r. Allowance per dependent			\$	480	8r.
8s. Dependent allowance: 8g X 8r			\$	480	8s.
8t. Total annual unreimbursed child ca	re costs		\$	2,000	8t.
8x. Total allowances: 8e + 8n + 8p + 8			\$	7,955	8x.
		larger, put 0)	\$	23.045	8y.

Family	Age	Annual Income	Unreimbursed Medical Expenses	Unreimbursed Disability Assistance Expenses	Childcare
НоН	61	\$25,000 wages	\$2,000		\$2,000 (for grandson)
Spouse (disabled)	52	\$6,000 SSI	-	\$3,500 To provide spouse attendant care to allow HoH to work	
Son	28	-	\$1,000	-	-
Grandson	4	-	-	-	-

8a. Total annual income: copy from 7i			\$	31.000	8a.
Permissive Deductions	678				
8b. Family Member Name	No.	No. 8c. Type of permissive deduction			
			\$	5115 MD1	
			\$		
			\$		
			\$		
			\$		
			\$		
Be. Total permissive deductions (sum of column 8d)					8e.
f head/spouse/co-head is under 62		nily member is disabled, skip to 8l			
8f. Medical/disability threshold: 8a X 0.10				2,325	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	3,500	8g.
8h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$	1,175	8h.
		ative and head/spouse/co-head is under 62 and not led, put 0	\$	-	8h.
If negative and head/spouse/co-head is elderly or disabled, copy from 8g					8h.
8i. Earnings in 7d made possible by disability assistance expense				25,000	8i.
 Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h) 			\$	1,175	8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	3,000	8k.
BI. Family is eligible for medical or child care expense hardship or both?				v	81.
8m. Total annual disability assistance and medical expenses 8 + 8k (if no disability expenses, copy from 8k)			\$	4,175	8m.
8n. Medical/disability assistance deduction:	If no o	disability assistance expenses or if 8g is less than 8f, put inus 8f (if 8m minus 8f is negative, put zero)	\$		8n.
	If disa	bility assistance expenses and 8g is greater than or equal copy from 8m	\$	4,175	<mark>8n</mark> .
8p. Elderly/disability allowance			\$	525	8p.
8q. Number of dependents (people under 18, or with disability, or full-time student. Do not count head of household, spouse, co-head, foster child/adult, or live-in aide.)				1	8q.
Br. Allowance per dependent			\$	480	8r.
8s. Dependent allowance: 8g X 8r			\$	480	8s.
8t. Total annual unreimbursed child care costs			\$	2.000	8t.
8x. Total allowances: 8e + 8n + 8p + 8s + 8t			\$	7,180	8x.
	8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)				

Family	Age	Annual Income	Unreimbursed Medical Expenses	Unreimbursed Disability Assistance Expenses	Childcare
НоН	61	\$0	\$2,000		\$2,000 (for grandson)
Spouse (disabled)	52	\$6,000 SSI	-	\$3,500 To provide spouse attendant care to allow HoH to work	
Son	28	-	\$1,000	-	-
Grandson	4	-	-	-	-

8a. Total annual income: copy from 7i			\$	6.000	8a.
Permissive Deductions	613				
8b. Family Member Name	No.	8c. Type of permissive deduction	8d.	Amount	
11 - 25			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
8e. Total permissive deductions (sum of column 8d)					8e.
If head/spouse/co-head is under 62 a		nily member is disabled, skip to 8l			
8f. Medical/disability threshold: 8a X 0.10			\$	600	8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)					8g.
Bh. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount			\$		8h.
	disabl	ative and head/spouse/co-head is under 62 and not led, put 0	\$		8h.
If negative and head/spouse/co-head is elderly or disabled, copy from 8g					8h.
8i. Earnings in 7d made possible by disability assistance expense					8i.
 Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h) 			\$		8j.
8k. Total annual unreimbursed health/medical expenses (if head/spouse/co-head under 62 and not disabled, put 0)			\$	3,000	8k.
BI. Family is eligible for medical or child care expense hardship or both?				v	81.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	3.000	8m.
An. Medical/disability assistance deduction:	If no o	If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		2,400	8n.
	If disa	bility assistance expenses and 8g is greater than or equal copy from 8m	\$		<mark>8n</mark> .
		8p. Elderly/disability allowance			0
8p. Elderly/disability allowance	1000000		\$	525	8p.
8q. Number of dependents (people un	der 18, or v	vith disability, or full-time student. Do not count head of live-in aide.)	\$	525 1	
8q. Number of dependents (people un household, spouse, co-head, foster chi	der 18, or v		\$	525 1 480	
8q. Number of dependents (people un household, spouse, co-head, foster chi 8r. Allowance per dependent	der 18, or v			1 480	8q.
	der 18, or v Id/adult, or		\$	1	8q. 8r.
8q. Number of dependents (people un household, spouse, co-head, foster chi 8r. Allowance per dependent 8s. Dependent allowance: 8q X 8r	der 18, or v Id/adult, or re costs		\$	1 480 480	8q. 8r. 8s.

PERMISSIBLE DEDUCTIONS

- → Applies to PH, HCV, MOD Rehab (including SRO) Programs
- → Only PHAs, not owners **may** adopt permissible deductions
- → If adopted, PH and MOD Rehab Programs must adopt written policy

PERMISSIVE DEDUCTIONS

- \rightarrow Examples include, but are not limited to:
 - Excessive travel expenses, not exceeding \$25/week per family for employment/educational related travel
 - ✓ Any amount of earned income established by PHA, such as all earned income of family earned by elderly family members
 - The amount of earned by family member during a certain time period such as all income by full-time dependent students between June and August

PERMISSIBLE DEDUCTIONS

- \rightarrow Must be given to all families that qualify for them
- → Are subject to federal nondiscrimination requirements, including reasonable accommodations
- $\rightarrow\,$ Families are still required to pay at least the minimum rent established by the PHA

PERMISSIBLE DEDUCTIONS

- → Cannot duplicate
 - ✓ Any mandatory deduction, or
 - ✓ Mandatory income exclusion

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Public Housing

 ✓ Not eligible for an increase in capital fund and operating fund formula grants

HCV, MOD REHAB, SRO

- ✓ Must have sufficient funding to cover the increased HAP costs
- ✓ Will not be eligible for an increase in HCV renewal funding

8a. Total annual income: copy from 7i			\$	8a.
Permissive Deductions		7		
8b. Family Member Name	No.	No. 8c. Type of permissive deduction		nt
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
Be. Total permissive deductions (sum of column 8d)				8e.
If head/spouse/co-head is under 62		nily member is disabled, skip to 8l		
8f. Medical/disability threshold: 8a X 0.10				8f.
8g. Total annual unreimbursed disability assistance expense (if no disability expenses, skip to 8k)			\$	8g.
3h. Maximum disability allowance: If 8g minus 8f is positive or zero, put amount				8h.
	disab	If negative and head/spouse/co-head is under 62 and not disabled, put 0		8h.
		If negative and head/spouse/co-head is elderly or disabled, copy from 8g		8h.
Bi. Earnings in 7d made possible by disability assistance expense				8i.
8j. Allowable disability assistance expense: lower of 8h or 8i (if 8g is less than 8f and head/spouse/co-head elderly or disabled, copy from 8h)			\$	8j.
8k. Total annual unreimbursed health/ put 0)	medical ex	penses (if head/spouse/co-head under 62 and not disabled,	\$	8k.
BI. Family is eligible for medical or child care expense hardship or both?				81.
8m. Total annual disability assistance and medical expense: 8j + 8k (if no disability expenses, copy from 8k)			\$	8m.
8n. Medical/disability assistance deduction:		If no disability assistance expenses or if 8g is less than 8f, put 8m minus 8f (if 8m minus 8f is negative, put zero)		8n.
		If disability assistance expenses and 8g is greater than or equal to 8f, copy from 8m		<mark>8</mark> n.
8p. Elderly/disability allowance			\$	8p.
8q. Number of dependents (people un household, spouse, co-head, foster chi		with disability, or full-time student. Do not count head of live-in aide.)		8q.
8r. Allowance per dependent			\$	8r.
8s. Dependent allowance: 8g X 8r			\$	8s.
8t. Total annual unreimbursed child care costs			\$	8t.
8x. Total allowances: 8e + 8n + 8p + 8	s + 8t		\$	8x.
8y. Adjusted annual income: 8a minus 8x (if 8x is larger, put 0)			\$	8y.





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