

**GUIDELINES TO DETERMINE PARTICIPANT ELIGIBILITY
FOR FREE AND REDUCED PRICE MEALS
School Year 2016-2017**

ANNUAL FAMILY INCOME BEFORE DEDUCTIONS

ELIGIBLE FOR FREE MEALS OR FREE MILK				ELIGIBLE FOR REDUCED PRICE MEALS		
FAMILY SIZE	YEARLY	MONTHLY	WEEKLY	YEARLY	MONTHLY	WEEKLY
ONE	\$15,444	\$1,287	\$297	\$21,978	\$1,832	\$423
TWO	20,826	1,736	401	29,637	2,470	570
THREE	26,208	2,184	504	37,296	3,108	718
FOUR	31,590	2,633	608	44,955	3,747	865
FIVE	36,972	3,081	711	52,614	4,385	1,012
SIX	42,354	3,530	815	60,273	5,023	1,160
SEVEN	47,749	3,980	919	67,951	5,663	1,307
EIGHT	53,157	4,430	1,023	75,647	6,304	1,455
FOR EACH ADDITIONAL FAMILY MEMBER, ADD						
	5,408	451	104	7,696	642	148

CONVERSION FACTOR

Annual Income Conversion: Weekly X 52, Every 2 Weeks X 26, Twice A Month X 24, Monthly X 12