SHARE OF COST DETERMINATION—MFBUs WHICH DO NOT INCLUDE LTC PERSONS

Case nar	ne									C	ounty district	County use		
			Padat	erminatior	Char		Petroactive F				ffective eligibility date for a fective eligibility eligibility date for a fective eligibility e	or this budget Year		
County	Aid	STATE NUMBE Seven-Digit Serial Numbe	ER	Person		NA	Retroactive Elig.		BIRTH DATE Month/Day/Year		(1) Social Secur (2) Health Insurar	rity Number and	nd mber Other	
						,					(<u>1</u>) (2)			
											(1)		_	
											(2)			
											(2)			
											(2)			
											(2)		-	
											(2)		-	
											(1) (2)		-	
BLIND), OR	MFBU MEMBER DISABLED PLU (EXCEPT PA OI	S INCO	ME OF SPO	<i>'</i>		MFBU MEMBERS OR OTHER PA)	S NOT L	listed in I.	III. SI	HARE OF COST COM	PUTATION		
OR PARENT (EXCEPT PA OR OTHER I A. Nonexempt Unearned Income (a) ABD—MN Spo			•	A. None	A. Nonexempt Unearned Income					ountable Income from				
			IN S	(b) pouse or Pa	rent 1. OAS	1. OASDI					ection I, line 14 countable Income from			
1. OASDI				2. Net i	ncome fro	m property				ection II, line 9 ncome allocated from L	TC/B&C			
2. Net income					3. Othe	3. Other—itemize					erson to family member t home (176W, Part III)	rs		
from property										4. C	ombined countable Inc	ome		
3. Other—itemize										add 1, 2, and 3)	2			
4.					4.	4.		·		llocation to excluded ch				
5. Total						5. Total unearned Income			(176 W, Part I)					
(add 1 through 4) (a) 6. Combined unearned Income		(b)		(add 1 through 4)				6. Income to determine PA Eligibility					
(add 5(a) and 5(b))				B. Nonexempt Earned Income					7. Health Insurance					
7. Any Income deduction			\$	5		6. Total net earned Income (MC 176 W, Part IV, line 11)			8.					
8. Countable unearned income (6 minus 7)					C. Total	Countab	le Income			9.				
B. Nonexempt Earned Income						7. Subtotal				 10. Total allocations/deductions (add 5 through 9) 		ons		
9. Gross Earned					, ,	5 and 6)	lineny neid				otal net nonexempt Inco	ome		
Income (a) 10. Combined earned Income			(b)		8. Child support/alimony paid 9. Total countable Income					minus 10) tal net nonexempt Income			
(add 9(a) and 9(b))					inus 8)					ounded laintenance need				
11. \$65 earned Income deduction plus \$ unused \$20					NOTE: If there is income from which educational expenses are deducted (Section 50547), show calculations here. Enter net amount on line 3 or 4.				a. MFBU members not in					
12. Remainder									b	LTC number: b. MFBU members in LTC				
(subtract 11 from 10) 13. Countable earned Income					Total inc	ome for e	ducational purpose	_		D.	 Personal needs 			
(divide 12 by 2) 14. Total countable Income					Less tot	al educatio	on expenses	_			 Upkeep of home Needs of disabled d 	lependents		
(add 8 and 13)					Net cou	ntable Inco	ome	_		C.	. Total maintenance ne (13a + 13b)	ed		
NOTE: If any of the following deductions apply, complete MC 176 W, Part VI, before completing Column I:											hare of cost			
Educational Expenses Section 50547 Absent Parent Support Section 50541										,	12 minus 13c)			
Student DeductionSection 50551\$30 Plus 1/3Section 50551				ction 50551 ction 50551.1							15. Underpayment adjustment			
				ction 50551.4 ction 50551.5							djusted Share of Cost I4 minus 15)			

IV. EXEMPT INCOME

Eligibility Worker signature	Worker number	Computation date	County use
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