

Take Stock in Children (TSIC) Income Eligibility Guidelines July 1, 2024 to June 30, 2025

Applicants will be required to provide a copy of **their most recent 1040 Tax Return form** and their household annual income must qualify for one of the options in the chart below:

Income Eligibility for Take Stock in Children (Information checked from 1040 tax return)								
Household Size	Maximum Annual Household Income							
1	27,861							
2	37,814							
3	47,767							
4	57,720							
5	67,673							
6	77,626							
7	87,579							
8	97,532							
For each additional family member, add:	9,953							

Applicants may also be eligible if student is a current recipient of one of the following:

- 1) SNAP
- 2) TANF
- 3) Medicaid
- 4) Currently in Foster Care or certified homeless

Note: <u>The student who is applying to be a part of the Take Stock in Children program MUST be listed as a</u> <u>dependent on all income verification documents submit with their application. If the student applying is not</u> <u>listed and the household income on the document, then it CANNOT be used to verify the student's eligibility.</u>

Additional information is continued on the next page.

The following documentation IS NOT acceptable to verify eligibility for TSIC:

a) W-2s/ Social Security Statement alone – May not reflect all income and does not verify that it is same household as student.

b) Disability – May not reflect all income for household and does not verify that it is same household as student.

c) Statement of non-filing of taxes through IRS – Does not indicate that income was below the need to file, just verifies that they did not file.

d) The free/reduced lunch screen in the School District's student profile program (i.e., FOCUS).

e) Direct Certification letter from State of Florida – The letter may not be issued by all school or districts where FRL is available to all students/schools. Students who qualify to receive Direct Certification from the state (i.e.- SNAP/TANF recipients, Foster Care or Homeless youth) should be able to prove eligibility for TSIC as outlined above.

Determining TSIC Eligibility through 1040 Tax Return

- The student applicant must be claimed as a **dependent** on the tax return provided to verify income eligibility.
- The **total number of dependents** listed on the tax return provided should be used to verify household size for income eligibility.

Example of determining income using the 1040 Tax Return:

Control 0.5. Individual income Tax Return Control Control <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>St. 16255</th> <th></th> <th></th>								St. 16255		
Import	Contraction in the second	CALCULATION OF CALCULATION OF	2.0.00000000000000000000000000000000000	Contract of the second						Find Student applicant's name on the tax return Calculate
In extended Latence Parademic states state states Parademic states states In extended Latence Parademic states states Parademic states states Parademic states states In extended In extended In extended Parademic states states Parademic states <td>Check only one box.</td> <td>If you checked the MFS box, en</td> <td>ter the name of</td> <td></td> <td></td>	Check only one box.	If you checked the MFS box, en	ter the name of							
where address luncter and street. In the address l	Your first name and	d middle initial	Last re	artwi			Yours	cial security number	/	
where address luncter and street. In the address l							1.000			
Create protection Protection Create protection Protection <td< td=""><td colspan="5">f joint setum, spouse's first name and middle initial Last name</td><td>20</td><td>Spouse</td><td>'s social security more</td><td>*</td><td></td></td<>	f joint setum, spouse's first name and middle initial Last name					20	Spouse	's social security more	*	
Output During	Home address (nu	imber and street). If you have a P.O.	box, see instruct	ions.		Apt. no.	Check	re il you, or your	n.	
Promp: Prome: Promp: Promp: Promp: <td>City, town, or post</td> <td>t office, if you have a foreign addres</td> <td>s, also complete i</td> <td>spaces below.</td> <td>State</td> <td>ZIP code</td> <td>0 90 1</td> <td>this fund. Checking a</td> <td></td> <td></td>	City, town, or post	t office, if you have a foreign addres	s, also complete i	spaces below.	State	ZIP code	0 90 1	this fund. Checking a		
Digital Basistics At any time sturing 2002, did jour (b) is reaver, law arrwett, wand, or puppend for perified, conserving), or (b) setting Bandard Image: Conserving Basistics Image: Conserving Basistics <td>Foreign country ne</td> <td>UTHE</td> <td></td> <td>Foreign province/st</td> <td>ate/county</td> <td>Ponign partie coo</td> <td></td> <td>e or refund.</td> <td><u>.</u></td> <td></td>	Foreign country ne	UTHE		Foreign province/st	ate/county	Ponign partie coo		e or refund.	<u>.</u>	
Bandard Bendaction Dependencino Seguinaria generative mutarias endurary you were a dual-tables providents in force in from in f										
Dependents these instructions: the function interest Coll las creation interest Interest interest Interest interest Interest interest Interest interest Interest interest Interest interest Interest interest interest Interest interest interest Interest interest interest interest Interest interest	Standard 8	Someone can claim: 🔲 You	as a depender	nt 🔲 Your spe	ouse as a penden		aucounts.)			
Dependents these instructions: the function interest Coll las creation interest Interest interest Interest interest Interest interest Interest interest Interest interest Interest interest Interest interest interest Interest interest interest Interest interest interest interest Interest interest	Age/Bindness Y	You: Were born before Jan	uary 2, 1968	Are blind	Spouse: Was b	iorn before Januar	y 2, 1958	Is bind		
Immon Last name number tayou Civit las credit Cells for devices Immon for Heining Last name number toperate immon immon Recome Immon Tax Total amount from form(k) W-2, box 1 (are instructions) immon	No. of Concession, Name of Con			121 cral sect	urity (3) Petation	and the second se		Nex for (see instructions)		
Image: Specific distribution			6 14	rumber			crodit	Crealit for other dependent	9	
Image: Nutricitions and arrunds: Image: Total arrows for momental (W-2) for the form form form (W-2) for the form form form form form form form form	han tour					24	1			
Ind Total armount from Form(4) W-2, box 1 (are instructions) 1s total armount from Form(4) W-2, box 1 (are instructions) 1s total armount from Form(4) W-2, box 1 (are instructions) 1s total armount from Form(4) W-2, box 1 (are instructions) 1s total is						2 C 🖸)			
arror In Table amount from form()d V-2, box 1 (ase instruction) to is is V-2 here, Alec To be amount from form()d V-2, box 1 (ase instruction) to is V-2 here, Alec To be amount from form()d V-2, box 1 (ase instruction) to is V-3 hard Modical diverpayee singers not reported on form [30 W-2] to is V-3 hard Modical diverpayee singers not reported on Form() W-2] to is V-3 and Modical diverpayee singers not reported on Form() SW-2] to is to is V-3 and Modical diverpayee singers not reported on Form() SW-2] to is to is V-3 and Modical diverpayee singers not reported on Form() SW-2] to is to is V-3 and Modical diverpayee singers not reported on Form() SW-2] to is to is V-3 and Modical diverpayee singers not reported on Form() SW-2] to is to is V-3 and Modical diverpayee singers not reported on Form() SW-2] to is to is V-3 and Modical diverpayee singers not reported on Form() SW-2] to is to is V-3 and Modical diverpayee singers not reported on the form SU Alex Payee singers not reported on the form SU Alex Payee singers not reported on the form SU Alex Payee singers not reported on midflot, check hare (See instructions) to is V-3 and Alex Payee singers not reported on midflot, check hare					10.0		1			
Income b Household employee wages not reported on Form (b) W-2 tb Wind Form C To income not reported on Ken ta (see instructions) 10 Winds Form Medical dependent care benefits from Form 8839, line 29 10 Winds form Find 10 Winds form Winds form Form 8919, line 6 11 Winds form Notifies and scotte care benefits from Form 8839, line 29 11 Winds form Find 12 Winds form Notifies and combe page instructions) 11 Instructors Instructors 11 Instructors Instructors Instructors	here .	8		1 1 1	1		1 10			
Income b Household employee wages not reported on Form (b) W-2 tb Wind Form C To income not reported on Ken ta (see instructions) 10 Winds Form Medical dependent care benefits from Form 8839, line 29 10 Winds form Find 10 Winds form Winds form Form 8919, line 6 11 Winds form Notifies and scotte care benefits from Form 8839, line 29 11 Winds form Find 12 Winds form Notifies and combe page instructions) 11 Instructors Instructors 11 Instructors Instructors Instructors	income 1	1a Total amount from Forma	W-2, box 1 (as	e instructions)	CALL ALL ALL AND A	a allana ta a	. 1			
that A FormAll Verbare, Also texts homes texts homes Verbare, Also texts homes texts homes Verbare, Also texts homes texts homes te	ncome	b Household employee was	es not reported	on Formisi W-2			1			
V2-ber, Also the Fight ODE-I find Decision searching Medical wake payments not reported on Form(5) W-2 (see instructions) 10 V2-ber, Also the Fight ODE-I find Decision Fight Searching Taxable dependent care benefits from Form 839, ine 29 11 V2-ber, Also tes a withheit. Taxable dependent care benefits from Form 839, ine 29 11 V0-ber V0-see Wapas from Form 8919, ine 6 11 V0-see Norfaxable combat pay electron (see instructions) 11 Tax-seering interest 2a 1 Tax-seering interest 0 1 Tax-seering interest 0 1 Tax-seering interest 0	Attach Form(s)	and the second se	and the second							
Note and the standard devices to the benefits from Form 2441, line 26 16 000-H II Am form Form 3919, line 6 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 11 12 11 13 11 14 12 15 10 16 11 17 12 18 11 11 12 11 12 12 12 13 12 14 15 15 16 16 11 17 12 18 10 19 10 19 10 19 10 19 10 19 10 10 10	N-2 here. Also				e instructions)				1	
000-R if if an as withinks if Employee-provided adoption bornelfits from Form 5838, line 20 if i you dd not ho if a Form Form 5919, line 6 if i 0 Wages from Form 5919, line 6 if i 0 Winges form Form 5919, line 6 if i 0 Winges form Form 5919, line 6 if i 0 Winges form Form 5919, line 6 if i 1 Norfaxable combet pay electron (see instructors) iii 2 Add lines 1a through Th iii 4 BA differs difficients 3a an use form b Taxable interest 4 BA differs difficients 5a 6 Bootal social social powerthy benefits 5a 6 Bootal social social social powerthy benefits 5a 7 Capital gain of (bost) 3a 8 Other income from Schedule 1, line 10 9 Add lines 12, 2h, 4b, 5b, 6b, 7, and 6. This is your total income 13 Subtract line 10 form ine 9. This is your adjusted groups income 13 Subtract line 10 form line 9. This is your adjusted income 14 Add lines 12 and 13 15 Subtract line 14 horn line 11, if zero or lines, enter-0-, This is your taxable income	W-2G and		100000000000000000000000000000000000000				- Annalise	the second s		
Vages from Form 8919, fine 6 9 Wages from Form 8919, fine 6 10 h Duber served incomes (pse instructions) 11 r Add lines 1a through Th 12 randod fine 1 2a b and diverse transport 14 r Add lines 1a through Th randod fine 4 14 r 15 r 14 r 14 r 15	1099-PL If 5ax				29	• • • • • • • •				
Profile				in runnin useara, nine			_			
V0. see i Norfaxable combat pay election (see instructors) 11 12 track fish. 8 2 Tax-seepret interest 2 1 12 track fish. 8 2 Tax-seepret interest 2 1 12 12 track fish. 8 3 0 10 12 13 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 14 15 14 14 14 15 14 14 15 14 14 15 14 14 15 14 14				T. T. T. T. T. T.						
z Add lines 1a through th results Oh. B 2a Tas-senargi interest 2a and display dividends 3a b Tas-senargi interest 2b and display dividends 3a b Tas-senargi interest 2b and display dividends 3a b Tas-senargi interest 2b and display dividends 4a b Tas-senargi 2b and display dividends 4a b Tas-senargi 2b and display dividends 6a b Tas-senargi 4b and display dividends 6a b Tas-senargi 1b and region of toss, Attach Schedule D Frequende D Fre	W-2, 500			+ + + + + +		* 1			-	Find total family income on
Stack Sch. 8 2a Tax-exempt interest 2a b Taxable interest anguind anguind anguind b Taxable interest ab 4a BA distributions 4a b Taxable interest ab 4a BA distributions 4a b Taxable interest ab 4a BA distributions 4a b Taxable interest ab 5a Persions and anrubits 5a b Taxable interest ab 5a Social social social point 6a b Taxable interest ab 5a Social social social point 6a b Taxable interest ab 5a Capital gain of loss. Atlach S Train is your total instructions) ab b 5a Outper income from Schedule 1, line 10 This is your total income ab 5a Subtract line 10 from line 9. This is your adjusted denotes A ab 5a Subtract line 10 from line 9. This is your adjusted denotes ab 5a Subtract line 10 from line 9. This is your total income 13 5a Subtract line 11 from line 9. This is your total income 13 5a Subtract line 11 from line 11, if zero or less, enter-0 This is your taxable income 13	netructions.		ection (see ma	unconst + +						This total failing meome on
Sequence 3a Coulified dividends 3a 4a IRA defundations 4a 4a IRA defundations 4b 5a Pensions and annuties 5a 5a Fill Taxable amount 5b 5a Fill Datable amount 6b 5a Fill Taxable amount 6b 5a Fill Datable amount 6b 5a Fill Taxable amount 6b 5a Fill Taxable amount 6b 5a Fill Taxable amount 6b 5a Fill Fill Fill 5a Captar grain of (basil) Altach Schedule D F required. If not required, check here 7 5a Outer finders for Schedule 1, line 20 10 5a Subtract file 10 from Fill B - This is your takable derus file 11 5a Subtract file 10 from File B - This is your adjusted grass income 11 5a Subtract line 10 from File B - This is yo	Amaria Kata D		l av l	ALL POOR A HILL	h Tavabla intere				1	Line 0
Add IPA distributions Add B andard dictions 60 Forsions and annuloss 60 Company 61 Forsions and annuloss 60 Company 61 Forsions 60 Company 61 Forsions 60 Company 7 Captair gain or (osa). Attach Schedule D F required. If not required, thack here 7 Company 7 Captair gain or (osa). Attach Schedule D F required. If not required thack here 7 Company 7 Captair gain or (osa). Attach Schedule 1, line 10 7 Company 7 Captair gain or (osa). Attach Schedule 1, line 26 10 Company 61 Subtract line 10 hom line 9. This is your stabled deductions from Schedule A) 11 Subtract line 10 hom line 9. This is your stabled deductions from Schedule A) 12 Tips cheated with business 13 Coupling to business income deduction from Schedule A) 13 Coupling to business income deduction from Schedule A) 13 14 Add lines 12 and 13 14 15 Subtract line 14 hom l					a literation along					Line 9.
Maded description Stription S			and bellene				and the second se	ALC: NOT THE OWNER OF THE OWNER OWNER OF THE OWNER OWN		
doubter for- tograd or tworked from tworked from two tworked tworked from two tworked two					B. LINGINGALLE BUILDES					
Comparison C						221 T L D L T L T			- /	
Verweiter, 19 State 7 Capital gain or (loss). Attach Schedule D if required. If not required, there 7 Verweiter, 18 Other income from Schedule 1, line 10 8 9 Verweiter, 19 Add lines 12, 2h, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 9 Verweiter, 19 Add lines 12, 2h, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 10 9 Verweiter, 19 Add lines 12, 2h, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 10 Verweiter, 19 Subtract line 10 from line 9. This is your adjusted gross income 11 Verweiter, 19 Subtract line 10 from line 9. This is your adjusted gross income 12 13 Subtract line 10 from line 9. This is your adjusted gross income 13 13 Guil/Indo business income from Stehelue A, 12 13 13 Guil/Indo business income deduction from Stehelue A, 12 13 14 Add lines 12 and 13 14 15 Subtract line 14 from line 11, if zero or less, erber -0 This is your taxable income 16	Sindle or			matted check is			n l			
B Dther income from Schedule 1, line 10 B Detroin the income from Schedule 1, line 10 B Advision 12, 2b, 3b, 4b, 5b, 6b, 7, and 6. This is your total income D Advision 12, 2b, 3b, 4b, 5b, 6b, 7, and 6. This is your total income D Advision 12, 2b, 3b, 4b, 5b, 6b, 7, and 6. This is your total income D Advision 12, 2b, 3b, 4b, 5b, 6b, 7, and 6. This is your total income D Advision 12, 2b, 3b, 4b, 5b, 6b, 7, and 6. This is your total income D Advision 12, 2b, 3b, 4b, 5b, 6b, 7, and 6. This is your adjusted gross income D D D Advision 12, 2b, 4b, 5b, 6b, 7, and 6. This is your adjusted gross income D D Subtract line 10 from line 9. This is your adjusted gross income D D Subtract line 10 from line 9. This is your adjusted gross income D	sepontery.						HI.			
sinkburg 9 Add Ines 1z, 2h, 3b, 4b, 5h, 6b, 7, and 6. This is your total income 9 Subtract 10 Adjustments to income thom Schedule 1, line 20 10 Subtract 13 Subtract line 10 hom line 9. This is your adjusted groups income 11 Subtract ines 12, 2h, 3b, 4b, 5h, 6b, 7, and 6. This is your adjusted groups income 11 Subtract ines 10 mole bursters income doubtions rineme doubtion from Schedule A 12 Subtract ines 12 and 13 14 Subtract ines 11, if zero or less, enter -0 This is your taxable income 15	9 12,900			reduced a note	equired, chieck here					
unreferse scenae 10 Adjustments to income from Schedule 1, line 20 10 Had of 11 Subtract line 10 from line 9. This is your adjusted gross income 11 standard deduction or itemized deduction or itemized deduction from Schedule A 12 13 Standard deduction or itemized deduction from Form 8996-A 13 14 Add lines 12 and 13 14 55 Subtract line 11 from ine 11, if zero or less, erter -0 This is your taxable income 16	identity or			This is used forted	harrows					
Bit Job 10 10 Bit Job Subtract line 10 from line 9. This is your adjusted gross income 11 Bit Job 12 Standard deduction or itemized deductions (from Schedule A) 12 Standard deduction or itemized deductions (from Schedule A) 12 13 Subtract line 10 from line 11. If zero or less, enter -0 This is your taxable income 13	LEVING SPARE	a state state and state and state								
Standards 12 Standard deduction or itemized deductions (from Schedule A) 12 Typic deviced 13 Qualified business income deduction from Form 8995 A 13 Typic deviced 14 Add lines 12 and 13 14 Substraind, see inductions, from line 11, if zero or less, enter -0 This is your taxable income 15	\$25,900									
1mic decision 13 Qualified business income deduction from Form 8995 or Form 8996-A 13 1mic decision 14 Add lines 12 and 13 14 15 Subtract line 14 from line 11, if zero or less, enter -0 This is your taxable income 15	bounehold.		and the second	Contraction of the second s						
w/ bis winder inschare/ bis Subtract line 14 hom line 11. If zero or less, enter -0 This is your taxable income 14 15 Subtract line 14 hom line 11. If zero or less, enter -0 This is your taxable income					Court of the second					
Deduction 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15	forms lights wandles								-	
						ante				
or Disclosure. Privacy Act, and Paperwork Reduction Act Notice, are separate instructions. Car, No. 11208 Form 1040 dottion					unitera .			Form 1040 per		