FY 2024-25 Supplement Program
Annual Income Levels

*Levels are based upon the 2023 U.S. Department of Health & Human Services Poverty Guidelines.**

Annual income is for the **entire household,** not just the employee.

Number of persons in family or household	Minimum Annual Income 200% (A group)	Maximum Annual Income 200% (A group)	Minimum Annual Income 250% (B group)	Maximum Annual Income 250% (B group)	Minimum Annual Income 300% (C group)	Maximum Annual Income 300% (C group)
2	$ 0.00	$ 39,440.00	$ 39,440.01	$ 49,300.00	$ 49,300.01	$ 59,160.00
3	$ 0.00	$ 49,720.00	$ 49,720.01	$ 62,150.00	$ 62,150.01	$ 74,580.00
4	$ 0.00	$ 60,000.00	$ 60,000.01	$ 75,000.00	$ 75,000.01	$ 90,000.00
5	$ 0.00	$ 70,280.00	$ 70,280.01	$ 87,850.00	$ 87,850.01	$ 105,420.00
6	$ 0.00	$ 80,560.00	$ 80,560.01	$ 100,700.00	$ 100,700.01	$ 120,840.00
7	$ 0.00	$ 90,840.00	$ 90,840.01	$ 113,550.00	$ 113,550.01	$ 136,260.00
8	$ 0.00	$ 101,120.00	$ 101,120.01	$ 126,400.00	$ 126,400.01	$ 151,680.00
9	$ 0.00	$ 111,400.00	$ 111,400.01	$ 139,250.00	$ 139,250.01	$ 167,100.00
10	$ 0.00	$ 121,680.00	$ 121,680.01	$ 152,100.00	$ 152,100.01	$ 182,520.00
11	$ 0.00	$ 131,960.00	$ 131,960.01	$ 164,950.00	$ 164,950.01	$ 197,940.00
12	$ 0.00	$ 142,240.00	$ 142,240.01	$ 177,800.00	$ 177,800.01	$ 213,360.00
13	$ 0.00	$ 152,520.00	$ 152,520.01	$ 190,650.00	$ 190,650.01	$ 228,780.00

*For families/households with more than 13 persons, add $10,280 for each additional person.