

2026 Income Eligibility Guidelines

Senior Nutrition & Wellness Program/Commodity Supplemental Food Program

Division of Food and Nutrition



Nevada
Department
of Agriculture

Prior to receiving USDA food each household must certify that their household's current income does not exceed the amounts listed below on all required State forms:

Household Size	Annual Gross Income	Monthly Gross Income
1	\$23,940	\$1,995
2	\$32,460	\$2,705
3	\$40,980	\$3,415
4	\$49,500	\$4,125
5	\$58,020	\$4,835
6	\$66,540	\$5,545
7	\$75,060	\$6,255
8	\$83,580	\$6,965

For each additional household member add \$710.00 per month.

THIS GUIDELINE IS IN ACCORDANCE WITH 150% POVERTY LEVEL ISSUED BY THE DEPARTMENT OF AGRICULTURE.

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the State or local Agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Mail Stop 9410, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.