

## DBF INCOME GUIDELINE

Below is our income guideline to determine eligibility for financial assistance.\* If your income exceeds our guideline, please provide information on any financial hardships to be considered with your application.

<b>FAMILY SIZE</b>	<b>YOUR ANNUAL INCOME IS BELOW</b>
2	\$53,352
3	\$67,392
4	\$81,432
5	\$95,472
6	\$109,512
7	\$123,552
8	\$137,604
9	\$151,644
10	\$165,684

\*DBF utilizes Income Standards for ACA Healthy Montana Kids (Insurance) (261% FPL) April 1, 2024.