Fill in this information to identify your case:					
Debtor 1					
_	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	United States Bankruptcy Court for the:		District of(State)		
Case number (If known)					

Check one only as directed in lines 40 or 42:
According to the calculations required by this Statement:
☐ 1. There is no presumption of abuse.
2. There is a presumption of abuse.
☐ Check if this is an amended filing

Official Form 22A-2

Chapter 7 Means Test Calculation

12/13

To fill out this form, you will need your completed copy of Form 22A-1: Chapter 7 Statement of Your Current Monthly Income (Official Form 22A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Determine Your Adjusted Income		
Copy your total current monthly income.	Copy line 14 from Official Form 22A-1 here 1.	
2. Did you fill out Column B in Part 3 of Official Form 22A-1?		
☐ No. Fill in \$0 on line 3d.		
☐ Yes. Is your spouse filing with you?		
☐ No. Go to line 3.		
Yes. Fill in \$0 on line 3d.		
Adjust your current monthly income by subtracting any part of your spou expenses of you or your dependents. Follow these steps:	use's income not used to pay for the household	
On line 14, Column B of Form 22A–1, was any amount of the income you repo the household expenses of you or your dependents?	orted for your spouse NOT regularly used for	
☐ No. Fill in 0 on line 3d.		
☐ Yes. Fill in the information below:		
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income	
3a.	\$	
3b.	\$	
Зс.	+ \$	
3d. Total. Add lines 3a, 3b, and 3c	\$ Copy total here → 3d\$	
4. Adjust your current monthly income. Subtract line 3d from line 1.	\$	

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 5-14. To find the IRS standards, either go to http://www.justice.gov/ust/eo/bapcpa/meanstesting.htm or ask for help at the clerk's office of the bankruptcy court.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 8 and 9 of Form 22A–1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 22A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.



7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories — people who are under 65 and people who are 65 or older — because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person
- \$_____
- 7b. Number of people who are under 65

X____

7c. **Subtotal.** Multiply line 7a by line 7b.

Copy line 7c here

\$_____

People who are 65 years of age or older

 Out-of-pocket health care allowance per person

.

7e. Number of people who are 65 or older

X ____

7f. Subtotal. Multiply line 7d by line 7e.

Copy line 7f
here → + \$_____

g. Total. Add lines 7c and 7f.....

\$_____Copy total here

\$_____

Official Form 22A-2

Chapter 7 Means Test Calculation

page 2

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

Use the U.S. Trustee Program chart to answer the questions in lines 8-9. Go to http://www.justice.gov/ust/eo/bapcpa/meanstesting.htm or ask for help at the clerk's office of the bankruptcy court.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.

\$

- 9. Housing and utilities Mortgage or rent expenses:
 - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

9a. 9a.

 Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Does payment include taxes or insurance?	Average monthly payment	
	☐ No ☐ Yes	\$	
	□ No □ Yes	\$	
	□ No □ Yes	+ \$	
9b. Total average mon	thly payment	\$	Copy line 9b

t \$_____ Copy line 9b here \$____ Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0.

9c. \$____ Copy line 9c here \$____

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing does not accurately compute the amount that applies to you, fill in any additional amount you claim.

\$____

Explain why:

- 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.
 - 0. Go to line 14.
 - 1. Go to line 12.
 - 2 or more. Go to line 12.
- 12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

\$_____

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Describe Vehicle 1: Vehicle 1

- Ownership or leasing costs using IRS Local Standard
- 13a.
- 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include installment payments for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1 Average monthly payment Copy 13b Repeat this amount here 🛨 on line 33b.

13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. Copy net Vehicle 1 expense here

Describe Vehicle 2: Vehicle 2

- 13d. Ownership or leasing costs using IRS Local Standard
- 13d.
- Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this amount here on line 33c.

13f.

13f. Net Vehicle 2 ownership or lease expense Subtract line 13e from 13d. If this amount is less than \$0, enter \$0. Copy net Vehicle 2 expense here

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. Ital monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-axes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pays. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that he total monthly amount that is withheld to pay for taxes. In equipments: The total monthly payroll deductions that your job requires, such as retirement contributions, union form costs. In amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. In the total monthly premiums that you pay for your term life insurance. In premiums for insurance on your dependents, for whole life, or for any other form of life insurance. In payments: The total monthly amount that you pay as required by the order of a court or administrative as spousal or child support payments. In payments on past due obligations for spousal or child support. You will list these obligations in line 35. In the total monthly amount that you pay for education that is either required:	\$ \$ \$
axes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pays. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that the total monthly amount that is withheld to pay for taxes. The total monthly payroll deductions that your job requires, such as retirement contributions, union form costs. The total monthly payroll deductions that your job requires, such as retirement contributions, union form costs. The total monthly premiums that you pay for your term life insurance. The total monthly premiums that you pay for your term life insurance. The premiums for insurance on your dependents, for whole life, or for any other form of life insurance. The total monthly amount that you pay as required by the order of a court or administrative as spousal or child support payments. The total monthly amount that you pay for education that is either required:	\$ \$ \$ \$
eductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union orm costs. amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. e: The total monthly premiums that you pay for your term life insurance. e: premiums for insurance on your dependents, for whole life, or for any other form of life insurance. d: payments: The total monthly amount that you pay as required by the order of a court or administrative as spousal or child support payments. e: payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$ \$ \$
e: The total monthly premiums that you pay for your term life insurance. premiums for insurance on your dependents, for whole life, or for any other form of life insurance. d payments: The total monthly amount that you pay as required by the order of a court or administrative as spousal or child support payments. payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$ \$ \$
e: The total monthly premiums that you pay for your term life insurance. premiums for insurance on your dependents, for whole life, or for any other form of life insurance. d payments: The total monthly amount that you pay as required by the order of a court or administrative as spousal or child support payments. payments on past due obligations for spousal or child support. You will list these obligations in line 35. the total monthly amount that you pay for education that is either required:	\$ \$
d payments: The total monthly amount that you pay as required by the order of a court or administrative as spousal or child support payments. payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$ \$
as spousal or child support payments. payments on past due obligations for spousal or child support. You will list these obligations in line 35. ne total monthly amount that you pay for education that is either required:	\$
ne total monthly amount that you pay for education that is either required:	-
on for your job, or	
sically or mentally challenged dependent child if no public education is available for similar services.	\$
	\$
alth care expenses, excluding insurance costs: The monthly amount that you pay for health care that is	•
de only the amount that is more than the total entered in line 7.	\$
identification, special long distance, business internet service, and business cell phone service, to the extent	+ \$
	\$
i	resically or mentally challenged dependent child if no public education is available for similar services. The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. The payments for any elementary or secondary school education. The payments for any elementary or secondary school education. The monthly amount that you pay for health care that is entered in line 7. The alth care expenses, excluding insurance costs: The monthly amount that you pay for health care that is entered in line 7. The alth and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings de only the amount that is more than the total entered in line 7. The alth insurance or health savings accounts should be listed only in line 25. The total monthly amount that you pay for telecommunication services, such as pagers, call identification, special long distance, business internet service, and business cell phone service, to the extent your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your apayments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, reported on line 8 of Official Form 22A-1, or any amount you previously deducted. The expenses allowed under the IRS expense allowances. Through 23.

Additional Expense Deductions		tional deductions allowed by the clude any expense allowances			
			ses. The monthly expenses for health insurance, of for yourself, your spouse, or your dependents.		
Health insurance		\$			
Disability insurance		\$			
Health savings account		+ \$			
Total		\$	Copy total here	. \$	
Do you actually spend this to	otal amount?		•		
☐ No. How much do you at ☐ Yes	ctually spend?	\$			
	necessary care and s	support of an elderly, chronicall	actual monthly expenses that you will continue to y ill, or disabled member of your household or	\$	
27. Protection against family v and your family under the Fa	27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.				
By law, the court must keep	the nature of these e	expenses confidential.			
line 8. If you believe that you have	home energy costs t	hat are more than the home en	non-mortgage housing and utilities allowance on ergy costs included in the non-mortgage housing		
and utilities allowance, then You must give your case tru- claimed is reasonable and n	stee documentation		ou must show that the additional amount	\$	
29. Education expenses for de child) that you pay for your d secondary school.	ependent children w dependent children w	who are younger than 18. The who are younger than 18 years o	monthly expenses (not more than \$147* per old to attend a private or public elementary or	\$	
You must give your case true reasonable and necessary a			ou must explain why the amount claimed is		
•	•		in on or after the date of adjustment.		
	ning allowances in the	e IRS National Standards. That	ctual food and clothing expenses are higher than amount cannot be more than 5% of the food and	\$	
To find the maximum addition for help at the clerk's office of			st/eo/bapcpa/meanstesting.htm or ask		
You must show that the add	itional amount claime	ed is reasonable and necessary	/.		
31. Continuing charitable cont to a religious or charitable or			ntribute in the form of cash or financial instruments	\$	
32. Add all of the additional ex Add lines 25 through 31.	opense deductions.			\$	

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Average monthl	y payment
----------------	-----------

Mortgages on your home

33a. Copy line 9b here\$_______

Loans on your first two vehicles

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?		
33d.		□ No □ Yes	\$	
33e.		□ No □ Yes	\$	
33f.		□ No □ Yes	+ \$	
33g. Total average monthly payment. A	dd lines 33a through 33f		\$	Copy tot

2.4	Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for
54.	Are any debts that you listed in line 33 secured by your primary residence, a venicle, or other property necessary for
	your support or the support of your dependents?

☐ No. Go to line 35.

☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 34, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount
		\$	÷ 60 =	\$
		\$	÷ 60 =	\$
		\$	÷ 60 =	+ \$
			Total	\$

Copy total here

\$_____

· , , .	our owe any priority claims — such as a priority tax, our bankruptcy case? 11 U.S.C. § 507	child support, or alimony -	– that are past due as	of the filing date	
<u> </u>	No. Go to line 36.				
U \	Yes. Fill in the total amount of all of these priority claims. listed in line 19.	Do not include current or or	ngoing priority claims, s	such as those you	
	Total amount of all past-due priority claims.		\$	÷ 60 =	\$
	you eligible to file a case under Chapter 13? 11 U.S.0 v.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyBa		ation, go to		-
	No. Go to line 37.				
	Yes. Fill in the following information.		-		
	Projected monthly plan payment if you were filing u	nder Chapter 13	\$	-	
	Current multiplier for your district as determined unter the Executive Office for United States Trustees. To http://www.justice.gov/ust/eo/bapcpa/meanstesting.clerk's office of the bankruptcy court.	find this information, go to	х		_
	Average monthly administrative expense if you wer	e filing under Chapter 13	\$	Copy total here	\$
Add	all of the deductions for debt payment. lines 33g through 36.				\$
Total Do	eductions from Income				
38. Add	all of the allowed deductions.				
Сор	y line 24, All of the expenses allowed under IRS expens	se allowances	\$	-	
Сор	y line 32, All of the additional expense deductions		\$	-	
Сор	y line 37, All of the deductions for debt payment		+\$	_	
Tota	al deductions		\$	Copy total here →	\$
Part 3:	: Determine Whether There Is a Presumption (of Abuse			
39. Calc	culate monthly disposable income for 60 months				
	Copy line 4, adjusted current monthly income				
	Copy line 38, Total deductions\$				
39b.					
	Monthly disposable income 11 U.S.C. § 707(b)(2) Subtract line 39b from line 39a.	Copy line 39c here →	\$	-	
	11 U.S.C. § 707(b)(2) \$		\$x 60	-	

×	×
Signature of Debtor 1	Signature of Debtor 2
Date	Date

Instructions for the Chapter 7 Statement of Your Current Monthly Income and Means Test Calculation

United States Bankruptcy Court 12/01/13

How to fill out these forms

Official Forms 22A–1 and 22A –2 determine whether your income and expenses create a presumption of abuse that may prevent you from obtaining relief from your debts under chapter 7 of the Bankruptcy Code. Chapter 7 relief can be denied to a person who has primarily consumer debts if the court finds that the person has enough income to repay creditors a portion of their claims set out in the Bankruptcy Code.

You must file 22A –1, the *Chapter 7 Statement of Your Current Monthly Income* (Official Form 22A –1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income for households of the same size in your state. If your income is not above the median, there is no presumption of abuse and you will not have to fill out the second form.

If your income is above the median, you must file the second form, 22A –2, *Chapter 7 Means Test Calculation* (Official Form 22A –2). The calculations on this form—sometimes called the *Means Test*—reduce your income by living expenses and payment of certain debts, resulting in an amount available to pay other debts. If this amount is high enough, it will give rise to a *presumption of abuse*. A presumption of abuse does not mean you are actually trying to abuse the bankruptcy system. Rather, the presumption simply means that you may have enough income that you should not be granted relief under chapter 7. You may overcome the presumption by showing special circumstances that reduce your income or increase your expenses.

If you cannot obtain relief under chapter 7, you may be eligible to continue under another chapter of the Bankruptcy Code and pay creditors over a period of time.

Read each question carefully. You may not be required to answer every question on this form. For example, your military status may determine whether you must fill out the entire form. The instructions will alert you if you may skip questions.

If you have nothing to report for a line, write \$0.

Some of the questions require you to go to other sources for information. In those cases, the form has instructions for where to find the information you need.

If you and your spouse are filing together, you and your spouse may file a single statement. However, if an exclusion in Parts 1 or 2 applies to either of you, separate statements may be required. 11 U.S.C. § 707(b)(2)(C).

Understand the terms used in the form

This form uses *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, this form uses *you* to ask for information from both debtors. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Things to remember when filling out these forms

- Be as complete and accurate as possible.
- If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).
- If two married people are filing together, both are equally responsible for supplying correct information.

Do not file these instructions with your bankruptcy filing package. Keep them for your records.