

# 2024 VA Survivor's Pension Worksheet

Veterans Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Surviving Spouse Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

VA INCOME LIMITS (MAPR) <small>until 11/30/22</small>	
Single Widow	\$11,102.00
Single Widow Housebound	\$13,568.00
Single Widow A&A	\$17,743.00
Widow w/1 dependent	\$14,529.00
Widow w/1 dependent housebound	\$16,989.00
Widow w/1 dependent A&A	\$21,166.00

**Asset Limitation = 155,356.00**

5 % RULE FOR 2021	
Single Widow	\$555.00
Widow w/1 dependent	\$726.00

WAR TIME PERIOD	
WWII	December 7, 1941 to December 31, 1946
KOREA	June 27, 1950 to January 31, 1955
VIETNAM	Nov 1, 1955 to May 7, 1975 for service in the RVN. Aug 5, 1964 to May 7, 1975 for service outside the
GULF/IRAQ/ AFGHANISTAN	August 1, 1990 to present

## Will I Qualify?

This example is for a widow with 1 dependent that does not need aid and attendance and is not housebound:

Total household income = 22,000.00

Total household med. exp. = 15,000.00

5% rule = 726.00

Widow w/1 dep. (MAPR) = 14,529.00

$22,000.00 - 15,000.00 - 726.00 = 6,274.00$

$14,529.00 - 6,274.00 = 8,255.00$

$8,255.00/12(\text{months}) = \$688.00$  is approximate monthly amount widow would receive in pension.

**PLEASE COMPLETE THE BACK SIDE OF THIS PAGE IN FULL.**

You will need to supply the following:

- ⇒ DD-214
- ⇒ Veteran's Death Certificate
- ⇒ All Marriage licenses. You will have to provide a complete marital history for you and your spouse. To include dates, places and names.
- ⇒ Divorce Decrees
- ⇒ Birth Certificate for dependent **CHILDREN ONLY**
- ⇒ Direct Deposit Information
- ⇒ Completed VA Form 21-2680(doctor to complete), Sitter's Fee form, and VA Form 21-0779 (all attached and if applicable)

*Before September 7, 1980, Veteran must have served at least 90 days of active duty, with at least 1 day during a war time period. After September 7, 1980, Veteran must have served at least 24 months or the full period for which called or ordered to active duty with at least 1 day during a war time period. Veterans discharge from service under other than dishonorable conditions. VA Widow Pensions are eligible to surviving spouses with lower income who are to disabled to work.*

## EXACT FIGURES ONLY

HOUSEHOLD INCOME	MONTHLY
Widow Employment	\$
Widow Social Security	\$
Widow Retirement	\$
Widow Interest/Dividend (to include IRA Distributions)	\$
Widow Other Source of Income	\$
DEPENDENT CHILDREN	\$
<b>(A) TOTAL INCOME times 12 =</b>	<b>\$</b>

ASSETS	TOTAL
Widow Checking Acct.	\$
Widow Savings Acct.	\$
Widow Stocks, Bonds, etc.	\$
Widow IRA, Money Mgmt., etc.	\$
Other Assets	\$
<b>TOTAL ASSETS</b>	<b>\$</b>
Additional property other than primary residence	Lot size= \$
<b>If you have assets, complete --- 21P-0969</b>	

MEDICAL EXPENSES	MONTHLY
Widow Medicare Premiums	\$
Widow Private Medical Insurance	\$
Widow Supplemental Ins. Rx	\$
Widow Supplemental Ins. Medical	\$
Widow Assisted Living Facility	\$
Widow Nursing Home Cost	\$
Widow Sitter Fee (private in-home care)	\$
<b>TOTAL MEDICAL EXPENSES times 12 =</b>	<b>\$</b>
<b>MINUS 5% RULE (Table on Front Page)</b>	<b>\$</b>
<b>Equals (B) MEDICAL DIFFERENCE</b>	<b>\$</b>

I hereby certify to the best of my knowledge and ability that the above information is true. I understand that the Department of Veterans Affairs will complete an income match with the IRS and the Social Security Administration. I further understand that if this information is not true and the benefit is granted it will create a debt with the Department of Veterans Affairs.

\_\_\_\_\_

Signature of Surviving Spouse

\_\_\_\_\_

Date

**Complete Steps below to find out approx. monthly benefit.**

STEP 1	STEP 2	STEP 3
Subtract (A) Total Income \$_____ from (B) Medical Difference \$_____ to equal Net Income = \$_____	Get MAPR (table on front page) \$_____ and subtract Net Income (STEP 1) \$_____ to equal Yearly Pension Amount = \$_____. <b>(If amount is negative - no benefit is allowed)</b>	Divide Yearly Pension Amount (STEP 2) \$_____ by 12 months to get approx. monthly benefit amount= \$_____