

U.S. DEPARTMENT OF AGRICULTURE  
Food and Nutrition Service  
**STATE ISSUANCE AND PARTICIPATION ESTIMATES**

According to the Paperwork Reduction Act 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0081. The time required to complete this information collection is estimated to average 5.7 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information.

DUE DATE: By the 19th of each month, phone data to the appropriate FNS Regional Office and mail the original to the FNS Regional Office.

1. STATE AND CODE :	CURRENT MONTH	PREVIOUS MONTH	SECOND PRECEDING MONTH
	MONTH/YEAR:	MONTH/YEAR:	MONTH/YEAR:
2. ISSUANCE (DOLLARS) .....	ORIGINAL ESTIMATE	REVISED ESTIMATE	ACTUAL/FINAL
a. REGULAR ONGOING:			
b. D-SNAP ( NEW HOUSEHOLDS ):	N/A		
c. DISASTER SUPPLEMENTS ( ONGOING SNAP HOUSEHOLDS ):	N/A		
d. REPLACEMENTS:			
e. OTHER:			
f. TOTAL ISSUANCE (2a + 2b + 2c + 2d + 2e)			
3. NUMBER OF PARTICIPATING PEOPLE .....	ORIGINAL ESTIMATE	REVISED ESTIMATE	ACTUAL/FINAL
a. REGULAR ONGOING:			
b. D-SNAP ( NEW PARTICIPANTS ):	N/A		
c. DISASTER SUPPLEMENTS ( ONGOING SNAP PARTICIPANTS ):	N/A		
d. REPLACEMENTS:			
e. OTHER:			
f. TOTAL PEOPLE (3a + 3b + 3e)			
(g) NON- ASSISTANCE (SEE SPECIAL INSTRUCTIONS FOR MARCH AND SEPTEMBER REPORTING OF THIS ITEM)			
(h) PUBLIC ASSISTANCE (SEE SPECIAL INSTRUCTIONS FOR MARCH AND SEPTEMBER REPORTING OF THIS ITEM)			
4. NUMBER OF PARTICIPATING HOUSEHOLDS .....	ORIGINAL ESTIMATE	REVISED ESTIMATE	ACTUAL/FINAL
a. REGULAR ONGOING:			
b. D-SNAP ( NEW HOUSEHOLDS ):	N/A		
c. DISASTER SUPPLEMENTS ( ONGOING SNAP HOUSEHOLDS ):	N/A		
d. REPLACEMENTS:			
e. OTHER:			
f. TOTAL HOUSEHOLDS (4a + 4b + 4e)			
(g) NON-ASSISTANCE (SEE SPECIAL INSTRUCTIONS FOR MARCH AND SEPTEMBER REPORTING OF THIS ITEM)			
(h) PUBLIC ASSISTANCE (SEE SPECIAL INSTRUCTIONS FOR MARCH AND SEPTEMBER REPORTING OF THIS ITEM)			

5. REMARKS

DATE	NAME OF AUTHORIZED OFFICIAL	TITLE OF AUTHORIZED OFFICIAL
STAMP/CERTIFY DATE	LAST UPDATED BY	LAST UPDATED ON

GENERAL: Form FNS-388 is a State agency report of issuance and participation in the Supplemental Nutrition Assistance Program (SNAP). Each State agency shall submit the Form FNS-388 data to the FNS regional office no later than the 19th day of each month. When the 19th falls on a weekend or holiday, the data shall be submitted the first workday after the 19th. The data reported on the Form FNS-388 shall provide Statewide estimates for issuance and participation for the current and previous month; the second preceding month shall reflect actual or final participation data and revised estimates for issuance.

A separate Form FNS-388 must be submitted for each alternative issuance (non-EBT) demonstration project such as Supplemental Security Income (SSI) cash-out, Welfare Reform Cash-out (WRC), Pure Cash-out (PCO), etc., and for any other type of demonstration project under the SNAP when specified by FNS. Do not include such separate data in the Statewide Form FNS-388 for the regular program.

For estimated data only, dollar issuance values and participation numbers may be provided to the nearest hundred.

ENTERING DATA: Each block of the Form FNS-388 should be completed in accordance with the following instructions:

1. STATE AND CODE: Enter the State agency name; State 7-digit code; and, if applicable, the demonstration project name (e.g., EBT, WRC, SSI, PCO) for which the report is completed. Enter the appropriate month and year in the current, previous, and second preceding month columns.

2. ISSUANCE (DOLLARS):

Under the ORIGINAL ESTIMATE column, enter the original best estimate of the net issuance value for the current month for:

- a.) The regular ongoing State program or demonstration project;
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if "Other" is applicable.); and
- f.) The total issuance for the current month based on documented issuance (2a + 2d + 2e).

The original estimate is calculated from the master issuance file before households are issued their allotments and then should be adjusted based on historical experience for factors such as replacements, returns, etc. Best estimates of the net issuance value for D-SNAP (new households) and Disaster Supplements (ongoing SNAP households) are not required under the current month/original estimate column.

Under the REVISED ESTIMATE column, enter the revised estimate of the net issuance value for the previous month in:

- a.) The regular ongoing State program or demonstration project;
- b.) D-SNAP (new households);
- c.) Disaster Supplements (ongoing SNAP households);
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if "Other" is applicable.); and
- f.) The total issuance for the current month based on documented issuance (2a + 2b + 2c + 2d + 2e).

These figures are the latest available issuance records for the previous month, and may be based upon revised estimates or actual issuance. Benefits issued and returned in the same month are not included in the issuance figures. If records are not complete, use the latest data available and adjust the figure based on historical experience.

Under the ACTUAL/FINAL column, enter the actual total net issuance value for the second preceding month for:

- a.) The regular ongoing State program or demonstration project;
- b.) D-SNAP (new households);
- c.) Disaster Supplements (ongoing SNAP households);
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if "Other" is applicable.); and
- f.) The actual/final total issuance for the current month based on documented issuance (2a + 2b + 2c + 2d + 2e).

These figures may be revised estimates or actual issuance, and they shall include initial, combined, supplemental, restored and replacement benefits regardless of whether or not any portion of this total was improperly issued. These figures shall not include benefits issued and returned in the same month. In EBT systems, estimated or actual issuance is the value of the allotment credited to the household's account.

### 3. NUMBER OF PARTICIPATING PEOPLE:

Under the ORIGINAL ESTIMATE column, enter the original best estimate of the total number of participants for the current month in:

- a.) The regular ongoing State program or demonstration project;
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if “Other” is applicable.); and
- f.) Enter the total number of participating people for the current month based on documented issuance (3a + 3e).

Best estimates of the total number of people that participated in D-SNAP (New Participants) and Disaster Supplements (Ongoing SNAP Participants) are not required under the original estimate column.

Under the REVISED ESTIMATE column, enter the total number of participants for the previous month in:

- a.) The regular ongoing State program or demonstration project;
- b.) D-SNAP (new participants);
- c.) Disaster Supplements (ongoing SNAP participants);
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if “Other” is applicable.); and
- f.) The revised estimate of total number of people that participated based on documented issuance (3a + 3b + 3e).

Under the ACTUAL/FINAL column, enter the actual total number of people who participated in second preceding month for:

- a.) The regular ongoing State program or demonstration project;
- b.) D-SNAP (new participants);
- c.) Disaster Supplements (ongoing SNAP participants);
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if “Other” is applicable.); and
- f.) The actual/final total number of people that participated in based on documented issuance (3a + 3b + 3e);

Each participant should be included in the count only once, regardless of the number of allotments received.

### 4. NUMBER OF PARTICIPATING HOUSEHOLDS:

Under the ORIGINAL ESTIMATE column, enter the original best estimate of the total number of participating households for the current month in:

- a.) The regular ongoing State program or demonstration project;
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if “Other” is applicable.); and
- f.) Enter the total number of participating households for the current month based on documented issuance (4a + 4e).

Best estimates of the total number of households participating in D-SNAP (New Households) and Disaster Supplements (Ongoing SNAP Households) are not required under the original estimate column.

Under the REVISED ESTIMATE column, enter the total number of households that participated in the previous month for:

- a.) The regular ongoing State program or demonstration project;
- b.) D-SNAP (new households);
- c.) Disaster Supplements (ongoing SNAP households);
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if “Other” is applicable.); and
- f.) Enter the revised estimate of households that participated in the previous month based on documented issuance (4a + 4b + 4e).

Under the ACTUAL/FINAL column, enter the actual total number of households that participated in the second preceding month for:

- a.) The regular ongoing State program or demonstration project;
- b.) D-SNAP (new households);
- c.) Disaster Supplements (ongoing SNAP households);
- d.) Replacements;
- e.) Other (FNS will provide instructions to State agencies if "Other" is applicable.); and
- f.) The actual/final total number of households that participated in the second preceding month based on documented issuance (4a + 4b + 4e).

Each household should be included in the count only once, regardless of the number of allotments received.

#### 5. REMARKS:

FNS accuracy standards for issuance and participation require that second preceding month totals be within (+/-) 4 percent (+/-) 2 percent of the actual levels. Provide an explanation of any unusual circumstances that have caused issuance and participation data to not meet these accuracy standards, such as disasters, industry shut-downs, etc. For any disaster-related issuance and participation reported on this form, provide the location, a brief description, and the date disaster(s) occurred. The FNS-388 issuance data will be compared to net issuance reported on line 8 of the FNS-46, Issuance Reconciliation Report.

The FNS-388 report should be signed and dated by the designated State agency official, preferably that individual responsible for its completion. Also, provide the title of the person who signed the form.

#### SPECIAL INSTRUCTIONS - Items 3(g), 3(h), 4(g), and 4(h):

Provide non-assistance (NA) and public assistance (PA) data only for the report months of January and July. The NA and PA totals for the actual second preceding month (January and July) shall be reported on the March and September FNS-388 reports. In addition, as an attachment to these two reports, Project Area data should be submitted with the FNS-388 State wide report, provided that the Statewide report will not be delayed. Otherwise, the January and July Project Area data shall be submitted to FNS by April 19 and October 19, respectively or within 30 days from the due date of the FNS-388 Statewide report. This data is not required for disaster-related participation and issuance.

NOTE: PA households are those SNAP households in which all members are receiving income or benefits from TANF, SSI, or means-tested GA program. All other SNAP households are considered NA.