

Suffolk University
• Office of Student Financial Services • 73 Tremont Street • Boston, MA 02108
617-573-8470 • 617-720-3579 (fax)

2018 – 2019 Income Exclusion Worksheet Dependent Student

Student's Name _____ Student ID _____

According to your 2018-19 FAFSA, you and/or your parents reported an income exclusion for the 2016 calendar year. In order to verify this exclusion, please complete, sign and return this form.

Student ↓	Report 2016 Annual Amounts	Parent(s) ↓
	Education credits (American Opportunity Tax Credit and Lifetime Tax Credit) from 2016 IRS form 1040 line 50 or 1040A line 33.	
	2016 Taxable earnings from need-based employment programs, such as Federal Work-Study and need based employment portions of fellowships and assistantships. <i>Do not include employment from "merit based" fellowships or assistantships.</i>	
	Student grant and scholarship aid reported to the IRS in your (or your parents') adjusted gross income (AGI). This includes AmeriCorps benefits (awards, living allowances and interest accrual payments). Only enter an amount if the grant/scholarship was reported on the 2016 tax return and included in the AGI.	
	Combat pay or special combat pay. Only enter the amount that was taxable and included in your (or your parent's) 2016 adjusted gross income. Do not report untaxed combat pay.	
	Earnings from work under a Cooperative Education Program offered by a college during 2016.	
\$	Total	Total \$

Student's Signature _____

Parent's Signature _____

Date _____