

Suffolk University

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

**2019 – 2020 Income Exclusion Worksheet
Dependent Student**

Student's Name _____ Student ID _____

According to your 2019-20 FAFSA, you and/or your parents reported an income exclusion for the 2017 calendar year. In order to verify this exclusion, please complete, sign and return this form.

Student **Report 2017 Annual Amounts** Parent(s)

↓		↓
	Education credits (American Opportunity Tax Credit and Lifetime Tax Credit) from 2017 IRS form 1040 line 50 or 1040A line 33.	
	2017 Taxable earnings from need-based employment programs, such as Federal Work-Study and need based employment portions of fellowships and assistantships. Do not include employment from "merit based" fellowships or assistantships.	
	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 2017 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) 2017 adjusted gross income. Do not report untaxed combat pay.	
	Earnings from work under a Cooperative Education Program offered by a college during 2017.	
\$	Total	Total \$

Student's Signature _____

Parent's Signature _____

Date _____