

**Suffolk University**

• Office of Student Financial Services • 73 Tremont Street • Boston, MA 02108  
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**2021 – 2022 Income Exclusion Worksheet  
Dependent Student**

Student's Name \_\_\_\_\_ Student ID \_\_\_\_\_

According to your 2021-22 FAFSA, you and/or your parents reported an income exclusion for the 2019 calendar year. In order to verify this exclusion, please complete, sign and return this form.

Student **Report 2019 Annual Amounts** Parent(s)

| ↓  |  | ↓               |
|----|--|-----------------|
|    | 2019 Education credits (American Opportunity Tax Credit and Lifetime Tax Credit) from <b>2019 IRS form 1040 schedule 3, line 3.</b>  |                 |
|    | 2019 Child Support Paid because of divorce/separation or as a result of a legal requirement.<br><b>Do not include support for children who are part of your household.</b>   |                 |
|    | 2019 Taxable earnings from <b>need-based</b> employment programs, such as Federal Work-Study and need based employment portions of fellowships and assistantships.<br><b>Do not include employment from “merit based” fellowships or assistantships.</b>   |                 |
|    | 2019 taxable college grant and scholarship aid <b>reported to the IRS as income.</b> This includes AmeriCorps benefits (awards, living allowances and interest accrual payments) as well as grant and scholarship portions of fellowships and assistantships.<br><b>Only enter an amount if the grant/scholarship was reported on the 2019 tax return as income.</b> |                 |
|    | 2019 combat pay or special combat pay. <b>Only enter the amount that was taxable and included in your (or your parent’s) 2019 adjusted gross income.</b><br><b>Do not report untaxed combat pay.</b>   |                 |
|    | 2019 earnings from work under a Cooperative Education (Co-op) Program offered by a college.  |                 |
| \$ | <b>Total</b>   | <b>Total</b> \$ |

Student's Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_