

# RHODE ISLAND PUBLIC HIGHER EDUCATION SENIOR CITIZENS MEANS TEST 21/22

## ATTACH SIGNED COPY OF FEDERAL INCOME TAX RETURN

Student Name \_\_\_\_\_ SSN \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_

1. Are you a resident of Rhode Island?  Yes  No (**NOT ELIGIBLE**)
2. Are you at least sixty years of age?  Yes  No (**NOT ELIGIBLE**)
3. Did you file a 2020 tax return?  Yes (**GO TO ITEM 4**)  No (**SIGN THE AFFIDAVIT BELOW**)
4. Total income from Federal Form 1040 line 9. \_\_\_\_\_
5. Total number of dependents from Form 1040. Add 1 if single, add 2 if married filing jointly. \_\_\_\_\_
6. Enter the amount from the table below which corresponds to the number from item 5 above. \_\_\_\_\_

### Dependents:

1	\$38,640
2	\$52,260
3	\$65,880
4	\$79,500
5	\$93,120
6	\$106,740
7	\$120,360
8	\$133,980

For family units with more than eight members, add \$13,620 for each additional family member.

**If the amount in Item 6 is more than the amount in Item 4, you meet the means requirement.**

I declare that the above information is true and correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_

Please return this form along with copies of your signed Federal Income Tax Return and your Rhode Island driver's license to:

Bursar's Office, Building 4, Rhode Island College, Providence, RI 02908-1991