

RHODE ISLAND PUBLIC HIGHER EDUCATION UNEMPLOYMENT MEANS TEST 22/23

ATTACH SIGNED COPY OF FEDERAL INCOME TAX RETURN AND W2's

Student Name _____ SS Number _____

Home Address _____ Phone Number _____

1. Did your parent (or someone else) claim you as a dependent for 2021?

☐ Yes **(NOT ELIGIBLE)** No ☐ **(Please complete form)**

2. Did you file a 2021 tax return? ☐ Yes **(GO TO ITEM 3)** No ☐ **(Sign the affidavit below)**

3. Total income from Federal Form 1040 line 9. _____

4. Total number of dependents from Form 1040. Add 1 if single, add 2 if married filing jointly. _____

5. List 2021 wages from unemployed individual(s) line 1 of form W-2. (Please attach copy of all W-2/1099 forms.)

Company Name	Amount
_____	_____
_____	_____
_____	_____
_____	_____

Line 5 Total: _____

6. Subtract total of item 5 from line 3. _____

7. Enter the amount from the table below which corresponds to the number from item 4 above. _____

Dependents:	1	\$40,770	5	\$97,410
	2	\$54,930	6	\$111,570
	3	\$69,090	7	\$125,730
	4	\$83,250	8	\$139,890

For family units with more than eight members, add \$14,160 for each additional family member.

If the amount in Item 7 is more than the amount in Item 6, 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.