

Student Aid Form



PARENT NAME

OFFICE USE ONLY Barcode

6 092 TRN1



Diocesan Tuition Assistance Program for Families with Children Attending Catholic Schools (K-12)

This form must be postmarked no later than MARCH 3, 2015.

For common questions and answers about filling out the application, or to check status of the application process, please go to www.psas.org.

TO COMPLETE THIS APPLICATION YOU WILL NEED TO INCLUDE:

Please note: This application requires documentation for income received in 2014.

- 1. Detailed copies of all pages and Schedules of your 2014 Federal Income Tax Return Form 1040 1040A, or 1040EZ (as filed with the IRS) for individuals listed in Sections A and B. Recaps and/or Summary Forms are not acceptable. If you file Schedule(s) A, C, E, F or a statement of dependence, you must provide copies. If you earned income outside the US, provide all income documentation. If you have not yet filed, or are not required to file a tax return, see the REQUIRED DOCUMENTATION section of the INSTRUCTIONS.
- 2. Copies of all 2014 W-2 Wage and Tax Statement Forms, all 2014 1099/1099R for Interest/Dividends, Pensions Annuities and/or Misc. Income Forms for individuals listed in Sections A and B (Please make sure all documentation is copied on regular 8¹/₂ x 11 paper - documentation <u>CANNOT</u> be returned).
- 3. Documentation of TOTAL AMOUNTS received in 2014 for all Non-Taxable Income (see Section G for specific requirements).
- 4. Check or Money Order payable to PRIVATE SCHOOL AID SERVICE for the non-refundable application fee of \$30.00. Payment by check or electronic funds transfer (ACH) is your express authorization that if the payment is returned unpaid for any reason you consent to have your bank account electronically debited twice by PSAS or a third party collection agent. One debit will recover the item amount and the second debit will be the charge for applicable returned check and collection fees as allowed by law.
- 5. This application form filled out in its entirety, signed and dated by the individuals listed in Sections A and B.

IMPORTANT: If the above items do not accompany this application, your application will not be considered complete.

PSAS does not make final financial aid decisions. You will not receive results from PSAS. For more comprehensive instructions, please visit www.psas.org/instructions.

Keep a copy of this completed application and all documentation for your records.

Form #092 (2014)

STUDENT AID FORM // 2015-2016

A Parent, Respons	Guardian, or O sible for Tuitio	ther . 1	Adult			B Pare Resi	nt, Gu ding v	iardi vith	an, e Pare	or O ent A	ther	Adu	lt			
Check One: O Fa	ther O Mother) Ste	o-Father	O Step-Mot	her O Other Adult	Check One:) Fathe	r O	Moth	ner () Ste	p-Fath	ner C	Step-Moth	ner O O	ther Adult
Last Name		First N	lame		M.I.	Last Name					First I	Name			M.I.	
Social Security Nun	nber		ate of Birth	1		Social Security	/ Numbe	r				Date o	f Birth			
Address	Apartme	nt # (if	applicable	e) COUNT	Y OF RESIDENCE	Address			Ар	artme	nt # (i	f appli	cable)	COUNTY	OF RES	IDENCE
City			State		Zip Code	City							State		•	Code
() (Area Code) Primai	ry Phone	(A	Area Code)	Secondary	Phone	()_ (Area Code) P	rimary F	hone			(Area () _ Code) \$	Secondary F	Phone	
E-mail Address (R	EQUIRED)					E-mail Addres	ss (REQ	UIRE	D)							
Go Green: Che	donts List all d	h to cally Paris	and re h Code*: _ ent childre	are self-empl fer to Section	How Long? E-mail oyed, please check of K of this form. oldest to youngest,	including college	Check to correspond to corresp	this bo onden Yes ts, eve	ox if you ce ele	ou wis ectroni No ou are	h to cally Paris	lf ash Coo	you ar nd refe	re self-emplo er to Section	K of this fo	se check orm.
Depend	each der	enden	it's relation		uardian A: child, fos											
DO NOT LEAV	E BLANK # ir	Dayca	nre:	Numbe # in Pre-K:	# in Elemen	tary School:				n g scl Schoo			in Coll		_ Total: _	
Dependent Last Name	Dependent First Name	M.I.	Date of Birth	Relation to Parent/ Guardian A	Name, city, and state plans to attend in t	the Fall of 2015.	Grade in the fall of 2015	apply Aid	for	Did child re aid 2014- Yes	eceive I in	in Ca	ool in	Amount I/We feel I/We car pay toward tuition?		
1					School N			0	O	0	O	0	0			
2)					School N			0	O	0	O	O	0			
3					School N	Name		C	0	O	0	0	0			
4)					City and	Name		0	0	0	0	0	0			
5					School N	Name		0	0	0	O	O	0			
☐ Please check i	f additional depend	ents a	are listed (on a separa	City and te sheet.	State						*Ref	er to S	chool and	Parish Co	de Lists
D Househ	nold Informati	on														
1. Number of individuals who will reside in my/our household during the 2015-2016 school year: Parents/Guardians Children Other* Other* Other, please explain																
E Single,	Divorced, Re	mar	ried, or	Separa	ted Parents (T	To be comple	ted by	the	Pare	nt/G	uard	lian I	isted	in Sectio	n A)	
Date of separation	on (Month/Year)					2. Date of divo	rce (Mor	nth/Ye	ar) _							
3. Non-custodial pa	rent (Last, First, M.I	.)				4. Who claimed	d studen	t as a	tax d	epend	dent ir	2014	?			
5. Who is responsib	ole for the tuition for		pendent(s)	listed in Sec	ction C?			Percer	nt of tui	ition		Г	Recei	Child Suppo	nid .	_
Father Name:		father is	s responsible	e for:				paid (p	er stud	dent): _		_%	\$	\$.		Neither
Mother Name:			of students is responsib	le for:				Percer paid (p				_%	Rece	ived Pa	aid [Neither
Other Name:		Names of students other is responsible for:				Percer paid (p				_%	Recei	ived Pa	aid [■ Neither		

Taxable income (Answers in C	SOU CITE!	Non-Taxable income (Allsweis in o	SV SNET
The 2014 federal tax return for student's househo	old was:	List the total amount received from 1/1/14-12/31/14 for all DO NOT list monthly amounts.	
O Not filed yet (See Required Documentat		10. Child Support	\$ per yea
O I/We do not file. I/We only receive non-tax	able income - Go to Section G	11. Cash Assistance (TANF)	\$ per yea
	Actual 2014 Estimate 2015		\$ per yea
Total number of exemptions claimed on Federal		a. Medicaid received in 2014? • Yes • No	
Income Tax form. Parent/Guardian A total taxable income from W-2		13. Social Security income (SSA/SSD, etc.) (Provide documentation for all recipients in household.)	\$ per yea
wages (Box 1). Total income for Parent A only	\$	a. Social Security income (SSI Only)	\$ *
Parent/Guardian B total taxable income from W-2 wages (Box 1). Total income for Parent B only	\$\$	Total received in 2014 (Provide documentation for all recipients in household.)	\$
Net business income* from self-employment, farm, rentals, and other businesses. (*Go to Section K) (Attach Schedules C, E, and/or F from your IRS		14. Student loans and/or grants received for PARENT's education (Not college attending dependents or students listed in Section	
1040) See 2014 1040 lines 12, 17, and 18	\$\$	a. Total received in 2014	\$*
Other non-work taxable income from interest,		b. Total used for living expenses	\$ per yea
dividends, alimony, unemployment, and non- business income. See 2014 1040 lines 8a, 9a-11, 13,		15. Housing Assistance (Sec. 8, HUD, etc.)	\$ per yea
14, 15b, 16b, 19-21; See 2014 1040A lines 8a-14b	\$	a. Religious Housing Assistance (parsonage, manse, etc.)	
Allowable "Adjustments to Income" as reported on your IRS 1040, 1040A, or 1040EZ.		Total received in 2014	\$*
See 2014 1040 line 36 or 1040A line 20	\$\$	16. Other non-taxable income (Working for cash, Adoption and/	
Total "Adjusted Gross Income" as reported on your		or Foster Subsidy, Worker's Comp., Disability, Pension/ Retirement, etc. Identify source(s) in Section L)	\$ per yea
IRS 1040, 1040A, or 1040EZ. See 2014 1040 line 37 or 1040A line 21	\$\$	a. Any and all Military/VA Benefits and/or Compensation	
Total Tax Paid as reported on your IRS 1040,		Total received in 2014 (Identify source(s) in Section L)	\$ per yea
1040A, or 1040EZ. See 2014 1040 line 63 or 1040A line 39	\$\$	17. Loans/Gifts from friends or relatives	\$ per yea
Medical/Dental expenses as reported on Schedule		 Personal Savings/Investment Accounts used for household expenses (Do not include totals listed in Section I) 	\$ per yea
A, line 1 of your IRS 1040 form.	\$\$	19. Total non-taxable income for 2014	\$ per yea
Charitable Contributions as reported on Schedule A, line 19 of your IRS 1040 form.	\$ \$	*You must provide 2014 YEAR-END documentation for items 11-16a	; either a YEAR-END Statem
Housing Information (DO NO		from the appropriate Public Agency, or documentation showing Assets & Investments (Current Value)	
Tiousing information (DO NO	T LEAVE BLANK)	Assets & Investments (Current valu	les)
. Do you rent or own your residence?	O Rent O Own (go to line 22)	23. Total amount in cash, checking, and savings accounts	\$
. If renting, what is the monthly rental payment?	\$	24. Total value of money market funds, mutual funds, stocks, bonds, CDs, or other securities	\$
a. Amount paid by household	\$ per month		Ψ
,	•	retirement accounts	\$
b. Amount paid by other source(s)	\$ per month	a. What was your total contribution to your retirement	
c. Are you current on your monthly payment?	O Yes O No	account(s) in 2014 (IRA, Keogh, 401K, SEP, etc.)? 26. If you own real estate other than your primary residence	\$
If No, what was the total amount paid in 20	14? \$	a. What is the fair market value?	· ·\$
If you own a residence:		b. What is the amount still owed?	\$
a. What is the current market value?	\$	27. Do you own a business?	ĸ
b. What is the amount still owed, including		a. What is the fair market value of your business?	\$
home equity loans?	\$	b. What is the amount still owed?	\$
c. What is the monthly mortgage payment?	\$ per month	28. Do you own a farm? Yes O No	·
d. Are you current on your monthly payment?	O Yes O No	If Yes , please go to Section	
		a. What is the fair market value of your farm?	\$
If No, what was the total amount paid in 20	14?	b. What is the amount still owed?	\$
Unusual Circumstances (Che	eck all that apply to your situ	nation within the past 12 months)	
a. Loss of job	a. Bankruptcy	☐ i. Death in the family ☐ m. Medi	cal/Dental expenses
b. Recent separation/divorce	f. College expenses	☐ j. Shared custody ☐ n. Share	ed tuition
☐ c. Change in family living status ☐	g. Income reduction	☐ k. High debt ☐ o. Othe	r (explain in Section L)
d. Change in work status	h. Illness or injury	☐ I. Child support reduction ☐ p. Loss	due to Hurricane Sandy

Parent/Guardian A: Print Name			SS#:	
Business Owners or Self-Emp	loyed Individuals (2014 Estir	mates)		
If you have not filed your 2014 Tax Return, and property, and/or a farm please provide an estim			dule C Sc	nedule E Schedule F
1. What is your total estimated GROSS business	income?	\$	\$	\$
2. What is your total NET business taxable inco	ome/loss? (DO NOT LEAVE BLANK)	\$	\$	\$
3. If your business pays your home rent or mortga	ige, what is the annual total?		\$	
4. If your business pays for your personal automo	bile, what is the annual total?		\$	
5. If your business pays any portion of other person	onal expenses, list total amount and ex	plain in Section L.	\$	
6. If you own rental property: What was the total a	mount of Rental Income received?		\$	
Explanations (Use this space to e	explain any answers which may	need clarification	.)	
Certification, Authorization, ar	nd Documentation Requiren	nents		
WHAT IS (IF ANY OF THE FOLLOWING	REQUIRED TO PROC		_	FRED COMPLETE)
1. This application form filled out in its entire	•			•
2. A check or money order made payable to l	PRIVATE SCHOOL AID SERVICE in	the amount of \$3	0.00. This is a non-	refundable application fee.
If you have filed a 2014 IRS Form 1040:	If you have not yet file 2014 IRS Form 1040			o not file an IRS O AND receive only
	mplete photocopy of your most recent For			axable income:
	040EZ (as filed with the IRS, with all Seroms, 2014 1099/1099R, or 1098 Form			2014 YEAR-END Social Services tc.). Food Stamp documentation,
2014 W-2 Forms 2014 1099/1099P	ing adult residing with the applicant(s). <i>If t</i> ubmitted after April 15, 2015, you must	• •	Housing Assistance	documentation, Student Loans and/tion for parent's education, Social
or 1098 Forms for any wage-earning of the	ne 2014 Extension for Filing Request, a	as approved by	Security income state	ements showing TOTAL AMOUNTS
adult residing with the applicant(s). the An electronic recap of this written applicant	IRS and a copy of your last filed tax re			ALL members of the household.
the electronic recap. Please check this bo				
OHECKOUL	Non-Refundable Application Proce			
	Electronic Recap Fee (optional)			
	Please make checks payable to PSA		Total	
I/We declare that the information on this for SERVICE to return this form and all attachments				
→ Parent/Guardian A	Date Pa	arish Name:		Code:
Parent/Guardian B				
This Student Aid Form (SAF), all attach				

Mail completed application and photocopies of all documentation to:

PRIVATE SCHOOL AID SERVICE, P.O. BOX 89434, CLEVELAND, OH 44101-6434

INTRODUCTION

PRIVATE SCHOOL AID SERVICE (PSAS) is under contract with the school, school system, or organization from which you obtained this application for tuition assistance. Our purpose is to provide a reasonable assessment of the ability of each family to pay for the education of their children at private and independent elementary and secondary schools.

Your Student Aid Form, all attachments, and an analysis of your SAF are sent only to the school(s) or agencies contracting with PSAS. No other agency will receive any information about this application or its attachments.

PRIVATE SCHOOL AID SERVICE does not make any decisions about recipients and amounts of financial aid awarded. Recipients and amounts of aid are determined by the designated school or agency. YOU WILL NOT RECEIVE RESULTS FROM PRIVATE SCHOOL AID SERVICE.

INSTRUCTIONS

A&B Parent, Guardian or Other Adult

This form should be filled out by the parent, guardian or other adult responsible for the tuition of the child or children attending a private or independent school contracting with PSAS. If the parents/guardians are divorced or separated, only the parent responsible for the tuition and any other adult residing in the household should fill out the form. If tuition is shared, each responsible party must complete a Student Aid Form (SAF) if financial aid is needed.

Answer *all questions* for both parent(s), stepparent(s), or guardian(s) responsible for tuition for the dependent(s) listed in Section C. **Do not leave any questions blank.** If natural parents are divorced, separated or single, answer all questions in Section E. If natural parents are divorced/separated and remarried, list information for custodial parent and new spouse. If either parent answers "self-employed," and has not filed a tax return, complete Section K. If you provide your email address to PSAS, it will be used for application related communication only. Your email address will also be provided to the organizations you list in Section C as part of your application. Your email address will not be shared with any other third party.

CALCULATIONS ARE BASED ON TOTAL HOUSEHOLD INCOME.

C Student Information

List all dependent children residing in your household in order of oldest to youngest. Indicate date of birth and the relation to Parent/Guardian A listed in Section A of the application (i.e. child, grandchild, foster child, stepchild, etc.). If your dependents will be enrolled in any tuition charging school or agency next fall (including daycare, preschool, elementary school, high school, college, or trade school), list the name of the school, city and state where the school is located. List the grade your child(ren) will enter next fall (2015-2016); the amount you feel you can pay toward tuition per year, and the amount of tuition charged per student per year.

If "No" is checked for a student listed in Section C, that student will not be considered for tuition assistance. For all additional dependents, use a separate sheet.

NOTE: The information regarding tuition charged per student assists PSAS in making the most equitable analysis of your ability to pay for private education. If you are unsure, please estimate.

D Household Information

ITEM 1: Enter total number of individuals living in the household. Include any college students claimed on the tax return. Do not include children who have moved out of the home. Include all family members dependent on and residing with the parent listed in Section A.

ITEM 2: Check the appropriate box indicating custodial parents' marital status. If parents are single, divorced, remarried, or separated, complete Section E.

Single, Divorced, Remarried, or Separated Parents

If dependent(s) parents are divorced or separated, or do not reside in the same household, the custodial parent must provide the information requested in Section E about the non-custodial parent.

If the date of separation took place in the year 2014, PSAS will require copies of any tax returns filed jointly or independently by both parent(s)/guardian(s) for 2014. Be sure to estimate the income in Section F for 2015.

ITEM 5: Indicate who is responsible for tuition and what percentage for the dependents listed in Section C. List the total amount of child support actually received by custodial parents listed in Sections A & B. List the total amount received and the total amount paid for **2014**.

Taxable Income (Answers in US\$ ONLY)

List all actual amounts for 2014 and estimated amounts for 2015.

ITEM 1: Enter the total number of exemptions you claimed on your 2014 IRS Form 1040, 1040A, or 1040EZ.

ITEM 2: Enter the total **2014** taxable income earned in wages, salaries and tips for parent/guardian/other listed in SECTION A. Attach all copies of **2014** W-2 forms and/or **2014** 1099 forms from all employers.

ITEM 3: Enter the total **2014** taxable income earned in wages, salaries and tips for parent/guardian/other listed in SECTION B. Attach all copies of **2014** W-2 forms and/or **2014** 1099 forms from all employers.

ITEM 4: Enter the total net income from business (attach Schedule C or C-EZ), all rents, royalties, partnerships (attach Schedule E), and all farm income or loss (attach Schedule F). If you have received income from any of these sources and are estimating your income for **2014**, you must also fill out Section K of this application. (See **2014** 1040 lines 12, 17, and 18, enter sum total.)

ITEM 5: Enter the total of all other taxable income from interest, dividend income (attach Schedule B if over \$400), taxable refunds, credits or offsets of state and local income taxes, alimony received, capital gain or loss (attach Schedule D). List all capital gain distributions not previously reported, total IRA distributions (if rolled-over, explain in Section L), pensions and annuities, unemployment compensation, taxable social security benefits, and any other taxable income. Attach copies of all Form 1099/1099R, and/or Form 1098 for Interest/Dividends, Pensions/Annuities or other misc. income. Attach copies of Social Security Income statements and Unemployment Compensation documentation for year-end 2014. (See 2014 1040 lines 8a, 9a-11, 13, 14, 15b, 16b, 19-21, or 1040A lines 8a-14b, enter sum total.)

ITEM 6: Enter allowable adjustments to income, such as IRA payments, self-employment tax, self-employed health insurance deduction, Keogh retirement plan and self-employed SEP deductions, penalty on early savings withdrawals, and alimony paid. Add together to arrive at your total adjustments. DO NOT include your standard deduction or deduction amounts for each family member. (See 2014 1040 line 36, or 1040A line 20.)

ITEM 7: Enter total adjusted gross income as reported on your IRS Form 1040, 1040A or 1040EZ. Attach all pages of the applicable tax form (1040, 1040A, 1040EZ) for documentation. (See **2014** 1040 line 37, or 1040A line 21.)

ITEM 8: Enter the Total Tax paid (not withheld) as reported on your IRS Form 1040, 1040A, or 1040EZ. (See 2014 1040 line 63, or 1040A line 39.)

ITEM 9a: Enter the total of any medical and dental expenses as reported on Schedule A, line 1 of your IRS Form 1040 (attach Schedule A).

ITEM 9b: Enter the total amount of Charitable Contributions as reported on Schedule A, line 19 of your IRS Form 1040 (attach Schedule A).

G

Non-Taxable Income (Answers in US\$ ONLY)

If you receive non-taxable income, you must list and provide documentation of the TOTAL YEARLY AMOUNTS received in 2014 for all recipients in the household for the following: Cash Assistance (TANF), Food Stamps, Social Security income, Student loans and/or grants (received for PARENT's education), Housing assistance (Section 8, HUD, etc.), Worker's Compensation, Disability or Retirement.

ITEM 10: Child support: Report total amount received for **2014** for all children in the household.

ITEM 11: Cash Assistance (TANF): Report total amount received for 2014.

ITEM 12: Food Stamps (SNAP): Report total amount received for **2014**. Do not combine with TANF or Medicaid.

ITEM 12a: Did you receive Medicaid in 2014?

ITEM 13: Social Security benefits: Report the total non-taxable (**SSA/SSD, etc.**) amount received in **2014** for all recipients in household.

ITEM 13a: Social Security benefits: Report the total non-taxable (**SSI ONLY**) amount received in **2014** for all recipients in household.

ITEM 14: Student loans and/or grants: Report the total amount received in **2014** for PARENT'S education. Do not list loans, grants or scholarships received for dependents in Section C. Identify how much of this income was used for household expenses in **2014**.

ITEM 15: Housing assistance: Report the total amount received for **2014**. Identify in Section L all sources of Housing assistance (government assistance, Section 8, HUD, family/friends or other sources), including monies received toward rental/mortgage payments and/or utilities.

ITEM 15a: Religious Housing assistance: Report the total amount received for 2014.

ITEM 16: Other non-taxable income: Report all additional non-taxable income received in 2014 including: Working for cash, Deductible IRA or Keogh payments; untaxed portions of pensions; tax exempt interest income; foreign income exclusion; Workers' Compensation; cash support or any money paid on your behalf, including support from a non-custodial parent or any other person (do not include court ordered support here); adoption and/or foster care subsidy, or any other benefit or income not subject to taxation by any government (Refugee Assistance, etc.). Identify source(s) in Section L.

ITEM 16a: Any and all Military/VA Benefits and/or Compensation: Provide your Leave and Earnings Statement (if applicable) and report the total amount received for 2014 of food and other living allowances paid to members of the military, veterans non-education benefits (Death Pension, Dependency and Indemnity Compensation, etc.), VA Educational Work-Study, etc. Identify source(s) in Section L.

ITEM 17: Loans/Gifts received from friends or relatives: Report the total amount received in 2014.

ITEM 18: Personal Savings/Investment Accounts: Report the total amount used in **2014** for household expenses.

ITEM 19: Total non-taxable income for 2014: Add together Items 10-18.

Н

Housing Information

ITEMS 20 and 21: If you rent your home or apartment, list your monthly rental or lease payment here, including amounts paid by household and other sources.

ITEM 21c: Indicate whether you are current on your monthly rental payment and if not, what the actual amount was that you paid in **2014**.

ITEM 22a: Determine the present value of the family home and list it. Local real estate agents should be able to help you if you are unsure.

ITEM 22b: Check with your lending institution and enter the amount still owed, including second mortgages.

ITEM 22d: Indicate whether you are current on your monthly mortgage payment and if not, what the actual amount was that you paid in 2014.

Assets and Investments

ITEM 23: List total of current balances in cash, savings, and checking accounts. Do not include IRAs or Keoghs.

ITEM 24: List total current market value of money market funds, mutual funds, stocks, bonds, CDs or other securities.

ITEM 25: List total current market value of all retirement funds, including IRA, Keogh, 401K, and SEP plans or other retirement accounts. List total amount contributed in **2014** for Item 25a.

ITEM 26: Answer Items 26a and 26b for any and all investment real estate (not including the family's primary residence), if applicable. **Do not list the value of your home.** Second homes, rental properties, and land contracts should be included.

ITEM 27: If you own a business, check the Yes box and answer Items 27a and 27b. If you have not filed your 2014 tax return, complete Section K of this application.

ITEM 28: If you own a farm, check the Yes box and answer Items 28a and 28b. If you have not filed your 2014 tax return, complete Section K of this application.

J

Unusual Circumstances

Check any and all items that apply to your situation. If your circumstances require explanation beyond the scope of this application, please notify the school to which you are applying and also include a letter of explanation with this application.

K

Business Income

Provide 2014 Business Income Estimates if you have not filed your 2014 Tax Return.

ITEM 1: List estimated total GROSS business income for 2014.

ITEM 2: List estimated total NET taxable business income/loss for 2014.

ITEM 3: List the total amount paid by business in 2014 for home rent or mortgage.

ITEM 4: List the total amount paid by business in **2014** for personal automobile.

ITEM 5: List the total amount of personal expenses paid by business in **2014** that do not fall into one of the categories above.

ITEM 6: List total amount of estimated rental income received in 2014.

If providing income estimates for more than one business, corporation or farm (Schedule C, Schedule E and/or Schedule F) please list information for each business, corporation or farm separately. Use additional sheet or Section L, if necessary.

L

Explanation

If any specific question requires clarification, write a brief explanation in this space. If your circumstances require explanation beyond the scope of this application, please notify the school to which you are applying.

M

Certification, Authorization, and Documentation Requirements

You **must** sign the form in this section. Your signature authorizes PSAS to release the form and attachments to the contracting schools indicated in Section C. By signing the form, you also certify that the information submitted is correct. This application CANNOT be processed without the appropriate signature(s) and the appropriate documentation.

REQUIRED DOCUMENTATION

If you have filed your 2014 IRS Form 1040:

You must submit photocopies of all pages of your **2014** Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules, **2014** W-2 Forms, **2014** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s). *Do not include your State tax return unless requested*.

If you have not filed your 2014 IRS Form 1040:

You must submit photocopies of all **2014** W-2 Forms, **2014** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s), and photocopies of all pages of your most recent Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules). *If this application is submitted after April 15, 2015, you must provide a copy of the 2014 Extension for Filing Request, as approved by the IRS.*

If you are an Independent Contractor or self-employed and have *not* filed your 2014 IRS form 1040:

You must complete Section K and submit photocopies of all pages of your most recent Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules), 2014 W-2 Forms, 2014 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s). If this application is submitted after April 15, 2015, you must provide a copy of the 2014 Extension for Filing Request, as approved by the IRS.

If you receive non-taxable income:

You must submit photocopies of your 2014 YEAR-END (01/01/14 - 12/31/14) Cash Assistance documentation (TANF, etc.), Food Stamp documentation, Housing Assistance documentation, Student loan and/or grant documentation (for PARENT's education), Social Security Income statements, showing the TOTAL AMOUNT received in 2014 for ALL members of the household. If you list any total for line 16, you must identify source(s) in Section L.

IF YOU EARNED INCOME OUTSIDE THE US, PROVIDE ALL DOCUMENTATION OF INTERNATIONAL INCOME.

Along with your application, you must include:

Copies of your 2014 Form 1040, 1040A, or 1040EZ (all pages) | Total Department of the Transport State of Processor State County and the Company of the Comp

Documentation Checklist

- ☐ Copies of all pages of your **2014** IRS Form 1040, 1040A, or 1040EZ including all Schedules.
- Copies of *ALL* W-2 and 1099 Forms for individuals listed in Sections A and B (All documentation should be copied on regular 8¹/₂ x 11 paper).
- ☐ Copies of all required non-taxable income documentation.

Keep a copy of this completed application and all documentation for your records. For more comprehensive instructions, visit www.psas.org/instructions.

Copies of your 2014 W-2 Forms FROM ALL EMPLOYERS

a Employe	e's social security number						
	OMB No. 154						
b Employer identification number (EIN)				1 Wages, tips, other compensation 2 Federal income tax with			
c Employer's name, address, and ZIP code				cial security wages	4 Social security tax withheld		
			5 Me	dicare wages and tips	6 Medicare tax withheld		
			7 Soc	cial security tips	8 Allocated tips		
d Control number			9		10 Dependent care benefits		
e Employee's first name and initial Last name	ne	Suff.	19 State	nqualified plans	12a		
				byee plan sick pay	120		
			14 0	ui	12d		
f Employee's address and ZIP code					Go d		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State incon	ne tax	18 Local wages, tips, etc.	19 Local income tax 20 Locality name		
Wage and Tax Statement		2014		Department of	f the Treasury-Internal Revenue Service		
Copy 2—To Be Filed With Employee's St Income Tax Return	ate, City, or Local						

Copies of your 2014 1099 Forms (where applicable)

PAYER'S name, street address, city		country, ZIP	1 Rents	OMB No. 1545-0115	1	
			\$ 2 Royalties	2014	Miscellaneous Income	
			\$	Form 1099-MISC		
			3 Other income	4 Federal income tax	withheld	Сору
			\$	\$		For Pay
PAYER'S federal identification number	RECIPIENT'S identificat	tion number	5 Fishing boat proceeds	6 Medical and health care	payments	
			s	\$		
RECIPIENT'S name	•		7 Nonemployee compensation	8 Substitute payments dividends or interest		For Privacy A and Paperwo Reduction A
Street address (including apt. no.)			\$	\$	Notice, see th	
			9 Payer made direct sales of \$5,000 or more of consumer	10 Crop insurance pro	ceeds	2014 Gener
City or town, province or state, coun	ry, and ZIP or foreign pos	tal code	products to a buyer (recipient) for resale ►	\$		Instructions f Certa
			11 Foreign tax paid	12 Foreign country or U.S. p	ossession	Information
			\$			Return
Account number (see instructions)		2nd TIN not	. 13 Excess golden parachute payments	14 Gross proceeds pa attorney	id to an	
			\$	\$		
15a Section 409A deferrals	15b Section 409A incom	ne	16 State tax withheld	17 State/Payer's state	no.	18 State income
\$	\$		\$	ļ		\$ \$

If you do not have all of the documentation required:

Contact the IRS for a transcript of your complete 1040, 1040A, or 1040EZ, and any Schedules, etc. Contact your employer for a copy of your W-2. Contact the appropriate company for a copy of your 1099.

Avoiding the Most Common Errors

THE MOST COMMON ERROR THAT APPLICANTS MAKE IS SENDING THE APPLICATION INCOMPLETE. IN ORDER FOR AN APPLICATION TO BE REVIEWED. IT MUST INCLUDE:

- All pages of your **2014** IRS Form 1040, 1040A, or 1040EZ (Federal Income Tax Return). **Do not send your state tax return, recap, or tax summary.** (If you have not yet filed your **2014** IRS Form 1040, or you do not file, please see the Required Documentation Section of the instructions.)
- 2014 W-2 and/or 1099 Forms for individual(s) listed in Sections A and B (Please make sure all documentation is copied on regular 81/2 x 11 paper).
- · Non-taxable income verification.
- A check or money order for the non-refundable application fee of \$30.00.
 - → Print clearly and neatly with a blue or black ball point pen.
 - Make a photocopy of your completed Student Aid Form and all supporting documentation for your records.
 - → Do not staple ANYTHING to the Student Aid Form.
 - Submit the original application only.
 - → Affix proper postage to the envelope (applications without sufficient postage will be returned by the post office).
 - □ Do not send any original documents. Originals cannot be returned.

PSAS CANNOT PROCESS YOUR APPLICATION IF YOU HAVE NOT INCLUDED THE REQUIRED DOCUMENTATION AND APPLICATION FEE.

Frequently Asked Questions

My spouse and I recently separated, who should fill out the application and with what information?

The person responsible for tuition should fill out the application. If you and your former spouse filed a joint tax return for the requested tax year then both adults should be included on the application. If both adults resided in the same home for half of the requested tax year then both parents should be included on the application. For example, if the application is requesting **2014** tax information and the couple separated in August **2014**, then both adults will be expected to provide documentation of their income.

I have not filed my tax return. What documents should I provide?

Please provide your last filed tax return and **2014** W-2 Forms. If you filed a Schedule C, E or F on the last filed tax return then you must provide gross and net business estimates in Section K. If you filed a Schedule C, E or F in the previous year's tax year, and do not plan on filing in the requested tax year, please state that in Section L. *Please Note: An IRS extension will be requested for all applications received April 15th and later.*

What is a net and gross business estimate?

Gross business income is the total amount of sales for a tax year. Net business income is the total amount of sales for a tax year minus the operating cost (The net business income is essentially the profit from the business, rental property or farm).

What is a Schedule C, E and F?

- A Schedule C refers to business income or loss.
- A Schedule E refers to *rental property*, royalties, partnerships, S corporations, trusts, etc.
- A Schedule F refers to farm income or loss.

I have children in pre-school and/or college who are not applying for aid. Should I put them on the application? If so, why does it matter?

Please list all dependent children residing in your home who attend a tuition charging school/program. PSAS factors in the amount of children the household has in tuition charging schools.

I live with a significant other who is not responsible for my child's tuition. Should I include their information?

Financial aid considerations are based on total household income. In an effort to maintain consistency PSAS considers all members of the household who are contributing to household living expenses even if they are not legally responsible for tuition.

Why should I provide an email address?

E-mail is used to set up your personal PSAS account ,correspond with PSAS and track your application online at www.my.psas.org. The email address provided is only used by PSAS and the school(s) or agencies contracting with PSAS and will not be provided to any other entity.

For more frequently ask questions please visit www.psas.org.

If your inquiry does not match any of the listed FAQ's please email PSAS at info@psas.org or call (440) 892-4272.

Diocesan Financial Assistance Program for Families with Children Attending Catholic Schools

Parish Code List

CODE	PARISH NAME	CITY	CODE	PARISH NAME	CITY
01670	St. John Church	Allentown	03310	Christ the King	Long Branch
	Holy Spirit Church		03910	The Parish of St. Thomas More	Manalapan
03250	Our Lady of Mt. Carmel Church	Asbury Park		St. Denis Church	Manasquan
	St. Peter Claver		02360	Our Lady of Perpetual	
	St. Agnes Church			Help Church	Maple Shade
	St. Elizabeth Church			St. Gabriel Church	
04730	St. Mary Church	Barnegat	02660	St. Isaac Jogues Church	Mariton
04190	Sacred Heart Church	Bay Head		St. Joan of Arc Church	
04300	St. Barnabas Church	Bayville		St. Clement Church	
	St. Rose Church			St. Mary of the Lakes Church St. Catherine Church	
	St. Mary Roman Catholic Church			St. Mary Catholic Church	
	Church of the Ascension			St. Joseph Church	
	St. Francis Church		03033	Church of Precious Blood	Monmouth Reach
04000	Church of Epiphany	Drick Town		Our Lady of Good	Worlinoda'i Bodon
	St. Dominic Church		02020	Counsel Church	Moorestown
	St. Ann Church		02120	Christ the Redeemer Church	Mount Holly
	St. Katharine Drexel			Sacred Heart Church	
	St. Charles Borromeo Church		02720	St. John Neumann Church	Mount Laurel
	St. Mary Catholic Church		03110	Holy Innocents Church	Neptune
	St. Mary of the	Ooks Nook	03290	Our Lady of Providence Church	Neptune
00110	Assumption Church	Deal	04010	Church of the Assumption	New Egypt
02280	Resurrection Parish	Delran	01580	St. James Church	Pennington
	Immaculate Conception Church			St. Martha Church	
	St. Dorothea Catholic Church			St. Peter Church	
	Incarnation-Saint James Parish			St. Paul Catholic Church	
	Church of the Nativity		01430	St. David the King Church	Princeton Junction
03510	St. Catherine Church	Farmingdale		St. Anthony Church	
02200	St. Francis and St. Clare Parish	Florence Township		St. James Catholic Church	
	St. Pius the Tenth Church			Jesus, the Good Shepherd	
03850	St. Robert Bellarmine Church	Freehold		Sacred Heart Church Church of Holy Cross	
03870	St. Rose of Lima Church	Freehold		St. Mark Catholic Church	
	Our Lady Queen of Peace Church	Hainesport		Our Lady of Perpetual	000 0111
01250	Our Lady of Sorrows-		01100	Help Church	Seaside Heights
	St. Anthony Parish		04370	St. Catharine Church	
	St. Gregory the Great Church		03430	St. Catharine Church	Spring Lake
	St. Raphael-Holy Angels Parish			Holy Eucharist Church	
	St. Vincent de Paul Church			St. George Catholic Church	
	Our Lady of Perpetual Help			St. Joseph Church	
	St. Anthony of Padua			St. Justin Church	
	St. Benedict Church			St. Luke Church	
	St. Catharine Church			St. Maximilian Kolbe Church	Toms River
	St. Alphonsus Catholic Church		01010	Blessed Sacrament-Our Lady of	
	St. Veronica Church		0.40-0	the Divine Shepherd Parish	
	St. Gertrude			Divine Mercy Parish	
	St. Monica Church			Korean Martyrs	
	St. Aloysius Church			Our Lady of the Angels Parish	
	St. Andrew			Sacred Heart Church	
	St. Ann Church			St. Hedwig ChurchSt. Joseph Catholic Church	
	Holy Family Church			St. Mary Catholic Church	
	Jesus, the Lord Church			St. Theresa Catholic Church	
	St. Joseph Catholic Church			St. Anselm Church	
	St. John Church			St. Michael Church	
	St. Anthony Claret			St. Jerome Church	
	St. Mary of the Lake Church			Our Lady of Good	-
	St. Pio of Pietrelcina		V 122V	Counsel Church	West Trenton
	Church of St. Ann		04450	St. Elizabeth Ann Seton Church	
	St. Leo the Great Church			Corpus Christi Church	
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Diocesan Financial Assistance Program for Families with Children Attending Catholic Schools

School Code List

CODE	SCHOOL NAME	CITY
5825	Our Lady of Mount Carmel	Asbury Park
5882	Mother Teresa Regional School	Atlantic Highlands
5827	St. Rose	Belmar
5888	St. Rose High School	Belmar
5830	St. Dominic	Brick Town
5832	St. Paul	Burlington
5833	St. Charles Borromeo	Cinnaminson
5835	Holy Cross High School	Delran
5836	St. Rose of Lima	Freehold
5839	St. Benedict	Holmdel
1956	St. John Vianney High School	Holmdel
5841	St. Veronica	Howell
5842	St. Aloysius	Jackson
5846	Holy Family School	Lakewood
5871	Notre Dame High School	Lawrenceville
5847	St. Leo the Great	Lincroft
5849	All Saints Catholic Regional	Manahawkin
5850	St. Denis	Manasquan
5851	Our Lady of Perpetual Help	Maple Shade
5852	St. Joan of Arc	Marlton
5853	St. Mary of the Lakes	Medford
5887	Mater Dei Prep High School	Middletown
5857	St. Mary	Middletown
5854	Our Lady of Good Counsel	Moorestown
5855	Sacred Heart	Mount Holly
5856	Holy Innocents	Neptune
5858	St. Peter	Point Pleasant Beach
5859	St. Paul	Princeton
1958	Red Bank Catholic High School	Red Bank
5860	St. James	Red Bank
5864	Holy Cross School	Rumson
5865	St. Catharine	Spring Lake
5881	Monsignor Donovan High School	Toms River
5866	St. Joseph	Toms River
5870	Incarnation	Trenton/Ewing
5876	St. Raphael	Trenton/Hamilton
5880	Trenton Catholic Academy Lower School	Trenton/Hamilton
1492	Trenton Catholic Academy Upper School	Trenton/Hamilton
5875	St. Gregory the Great Academy	Trenton/Hamilton Square
5873	St. Ann	Trenton/Lawrenceville
	Our Lady of Sorrows	
5877	St. Jerome	West Long Branch
5838	Pope John Paul II Regional School	Willingboro