



AAA Scholarship Foundation 2020-21 Application Arizona Income-Based Scholarship Program

Submission Deadline for Priority Processing: April 24, 2020

If you enroll your student in a private school **before** you have received a **SCHOLARSHIP AWARD LETTER** and **School Commitment Form (SCF)**, you will be responsible for your student's tuition and he/she may not qualify for future scholarship funding. Funding is not guaranteed. Please consider this before enrolling your student(s) in a private school.

ARE YOU ELIGIBLE TO SUBMIT AN APPLICATION? COMPLETE THE QUESTIONS BELOW TO FIND OUT.

- 1) Does the household live in Arizona?
 - ☐ Yes, **please continue to question #2.**
 - ☐ No, we live in another state. **STOP** – do not apply; your household is NOT eligible.
- 2) Is your student entering Kindergarten through 12th grade in Arizona?
 - ☐ Yes, my student is entering K through 12th grade in Arizona. **Please continue to question #3.**
 - ☐ No, my student will NOT be entering those grades. **STOP** – do not apply; your student does not qualify to receive a 2020-21 AAA scholarship.
- 3) Will your student be between the required ages to attend school for your state on or before September 1, 2020?
 - ☐ Yes, my Arizona student will be at least 5 years old but not 22 years old or older on September 1, 2020. **Please continue to question #4.**
 - ☐ No, my student will not meet the age requirements for my state. **STOP** – do not apply; your student does not qualify to receive a 2020-21 AAA scholarship.
- 4) Will your student meet one of the following requirements?
 - ☐ Yes, my student will be entering Kindergarten - *No Public School required.* **Please continue to #5.**
 - ☐ Yes, my student entering 1st through 12th grade attended at least 90 days in an Arizona Public School at any time in 2019-20 - *Public School Attendance Form required with application.* **Please continue to #5.**
 - ☐ Yes, my student is the dependent of a military member stationed in Arizona. *No Public School required. Copy of military orders required.* **Please continue to #5.**
 - ☐ Yes, my student attended an Arizona private school and is a renewal student or transfer request student. *If your student is a transfer request student, a Certificate of Eligibility to Transfer Form is required.* **Please continue to #5.**
 - ☐ No, my student does not meet the school attendance requirement for the grade they are entering. **STOP** – do not apply; your student does not qualify to receive a 2020-21 AAA scholarship.
- 5) AAA considers ALL household members and their income. To figure out your household size, add all the people you live with together; this is your household size. Now add ALL the annual earnings (**taxable and non-taxable**) for everyone in the household. This is your total annual income. Use these two numbers to look at the income chart below for your household size and income. Is your household income at or below the level for your household size?

2020-2021 Household Income/Financial Resources Table

(New means you did not receive a scholarship from any Organization in 2019-20 for any student in your home. Transfer means this student received funding from another Scholarship Organization in 2019-20. Renewal means you signed AAA scholarship checks for this student in 2019-20. Add-on means you signed AAA scholarship checks for another student in your home in 2019-20, but not for this student.)

** Business losses must be adjusted to zero and therefore, the total income will be adjusted accordingly to determine household eligibility.*

Household Size	NEW Max Awarded Up to: \$5,600 – grades K -8 \$6,900 – grades 9 -12	RENEWAL & TRANSFER Max Awarded Up to: \$5,600 – grades K -8 \$6,900 – grades 9 -12	RENEWAL, TRANSFER & NEW Max Awarded Up to: \$4,200 – grades K-8 \$5,175 – grades 9 -12	RENEWAL, TRANSFER & NEW Max Awarded Up to: \$2,800 – grades K -8 \$3,450 – grades 9 -12	RENEWAL, TRANSFER & NEW Max Awarded Up to: \$1,400 – grades K -8 \$1,725 – grades 9 -12
1	\$23,606	\$25,520	\$28,710	\$31,900	\$38,280
2	\$31,894	\$34,480	\$38,790	\$43,100	\$51,720
3	\$40,182	\$43,440	\$48,870	\$54,300	\$65,160
4	\$48,470	\$52,400	\$58,950	\$65,500	\$78,600
Each additional person add:	\$8,288	\$8,960	\$10,080	\$11,200	\$13,440

- ☐ Yes, we are at or below the income listed for our household size. **Please continue to question #6.**
 - ☐ No, our income is above the limit listed for our household size. **STOP** – do not apply; your household does not qualify to receive a 2020-21 AAA scholarship.
- 6) Is your household/ student otherwise eligible?
 - ☐ Yes, neither my student nor my household has been disqualified from the program for any reason, including an internal audit process. **Please continue to complete the application on the next page.**
 - ☐ No, my student or our household has been disqualified/revoked from program participation for any reason, including an internal audit process in the past. **STOP** – do not apply; your household does not qualify for a 2020-21 AAA scholarship.

2020-2021 AAA-ARIZONA K-12 Private School Tax Credit Scholarship Application - Page 2

IMPORTANT: Fill in ALL blank spaces provided throughout this form; write N/A or 0 if items do not apply to you.
DO NOT LEAVE ANY BLANK SPACES.
WRITE CLEARLY

A) PARENT/GUARDIAN "A" Living with the student

This individual is **required** to sign scholarship checks.

B) PARENT/GUARDIAN "B" Living with the student

This individual cannot sign scholarship checks.

Parent A Last Name, First Name, Middle Initial		Parent B Last Name, First Name, Middle Initial	
Social Security Number	E-mail address (REQUIRED)	Social Security Number	E-mail address (REQUIRED)
Relationship to the student: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Step-Mother <input type="checkbox"/> Other		Relationship to the student: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step-Father <input type="checkbox"/> Step-Mother <input type="checkbox"/> Other	
Home Phone Number	Cell Phone Number	Home Phone Number	Cell Phone Number
Home (Physical) Address, Apt. # (must be a street address, PO Box not acceptable)			
Home City, State, Zip		Home County/District	
Mailing Address (if different from above)			
Mailing City		Mailing State	Mailing Zip
Parent A Employed By	Work Phone	Parent B Employed By	Work Phone

C) HOUSEHOLD INFORMATION

1) Number of people who lived in your home during 2019: Parents/Guardians _____ + Children _____ + Others _____ = Total of above _____ (This is your "household size")	6) List any parents, not living in the home, for children who live with Parent(s) A and B. <table style="width: 100%;"> <tr> <th style="width: 70%;">Non-Custodial Parent's Name</th> <th style="width: 30%;">Child's Name</th> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>	Non-Custodial Parent's Name	Child's Name						
Non-Custodial Parent's Name	Child's Name								
2) What is the language spoken in your home: _____									
3) What is PARENT A's marital status today: <input type="checkbox"/> Single, never Married <input type="checkbox"/> Divorced (Divorce Agreement Required) <input type="checkbox"/> Married <input type="checkbox"/> Separated (Separation Agreement Required) <input type="checkbox"/> Divorced/Remarried <input type="checkbox"/> Widowed <input type="checkbox"/> Living w/boyfriend, girlfriend, fiancé	7) Does PARENT A and/or B have a divorce/separation agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No (If YES, provide a copy of the divorce/separation agreement if you do not claim the child(ren) on your taxes, to show that they live with you.)								
4) Does PARENT A receive child support for any children in the home? <input type="checkbox"/> Yes <input type="checkbox"/> No	8) Date of Separation (Month/Year) or N/A:								
5) Does PARENT B receive child support for any children in the home? <input type="checkbox"/> Yes <input type="checkbox"/> No	9) Date of Divorce (Month/Year) or N/A:								

D) HOUSEHOLD MEMBERS CLARIFICATION: List all people who lived with Parents A and B during 2019

You must provide ALL 2019 earnings and assistance documentation for the below individuals (Form 1040 Federal Tax Return, Social Security Income, etc.) List any additional people that live with you on a separate sheet of paper, if needed. If anyone has moved out or there is a change, you must explain on a separate sheet of paper. Birth Certificates are required for ALL children 18 and under.

PLEASE PRINT Name	Relationship to Parent A	Age	Did they file 2019 Federal Tax Return? (check one)	Total Earnings or Assistance Received in 2019	How long has this person lived with PARENT A?
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		

This application is the **ONLY** chance you have to explain your household situation. Please use additional paper if needed to give us **ALL** the necessary information to determine

PARENT/GUARDIAN A Name: _____ SS# _____

2020-2021 AAA-ARIZONA K-12 Private School Tax Credit Scholarship Application - Page 3

E) HOUSING INFORMATION

1) Do you rent or own your residence (check one)? <input type="checkbox"/> Rent <input type="checkbox"/> Own	
2) What is the monthly mortgage or rent payment? \$ _____ per month	
a. What amount do you pay? \$ _____	per month
b. What amount is paid by others? \$ _____	per month. Explain relationship to Parent A: _____

F) STUDENT INFORMATION (Only complete for students for whom you want a scholarship)

If applying for more than 2 students, make a copy of this page before completing every question.

Student #1 Last Name, First Name, Middle Initial: _____		Date of Birth (MM/DD/YY) Birth Certificate Required: _____	
Student SS#: _____		Student Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	
Student Relationship to Parent/Guardian A: <input type="checkbox"/> Child/Stepchild <input type="checkbox"/> Grandchild <input type="checkbox"/> Niece/Nephew			
*if applicable, must provide proof of guardianship <input type="checkbox"/> Other (Explain) _____			
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black, non-Hispanic			
<input type="checkbox"/> Hispanic <input type="checkbox"/> Mixed Race <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White, non-Hispanic			
Grade Level Student will be entering in August of 2020: _____			
Name of School attended 2019-2020: _____			
School County attended in 2019-2020: _____			
Type of School attended in 2019-2020: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Home School <input type="checkbox"/> Charter <input type="checkbox"/> Virtual <input type="checkbox"/> Not Applicable			
Does this student receive any of the following?: <input type="checkbox"/> TANF <input type="checkbox"/> Food Stamps <input type="checkbox"/> FDPIR <input type="checkbox"/> Free/Reduced Lunch <input type="checkbox"/> ESE <input type="checkbox"/> Title 1			
Type of Student: <input type="checkbox"/> New <input type="checkbox"/> Transfer <input type="checkbox"/> Renewal <input type="checkbox"/> Add-On			
<i>(New means you did not receive a scholarship from any Organization in 2019-20 for any student in your home. Transfer means this student received funding from another Scholarship Organization in 2019-20. Renewal means you signed AAA scholarship checks for this student in 2019-20. Add-on means you signed AAA scholarship checks for another student in your home in 2019-20, but not for this student.)</i>			

Student #2 Last Name, First Name, Middle Initial: _____		Date of Birth (MM/DD/YY) Birth Certificate Required: _____	
Student SS#: _____		Student Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	
Student Relationship to Parent/Guardian A: <input type="checkbox"/> Child/Stepchild <input type="checkbox"/> Grandchild <input type="checkbox"/> Niece/Nephew			
<input type="checkbox"/> Other (Explain) _____			
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black, non-Hispanic			
<input type="checkbox"/> Hispanic <input type="checkbox"/> Mixed Race <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White, non-Hispanic			
Grade Level Student will be entering in August of 2020: _____			
Name of School attended 2019-2020: _____			
School County attended in 2019-2020: _____			
Type of School attended in 2019-2020: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Home School <input type="checkbox"/> Charter <input type="checkbox"/> Virtual <input type="checkbox"/> Not Applicable			
Does this student receive any of the following?: <input type="checkbox"/> TANF <input type="checkbox"/> Food Stamps <input type="checkbox"/> FDPIR <input type="checkbox"/> Free/Reduced Lunch <input type="checkbox"/> ESE <input type="checkbox"/> Title 1			
Type of Student: <input type="checkbox"/> New <input type="checkbox"/> Transfer <input type="checkbox"/> Renewal <input type="checkbox"/> Add-On			
<i>(New means you did not receive a scholarship from any Organization in 2019-20 for any students in your home. Transfer means this student received funding from another Scholarship Organization in 2019-20. Renewal means you signed AAA scholarship checks for this student in 2019-20. Add-on means you signed AAA scholarship checks for another student in your home in 2019-20, but not for this student.)</i>			

BE SURE TO COMPLETE ALL PAGES OF THE APPLICATION, INCLUDING THE SIGNATURE PAGE (pg 5, section M).

Questions? Call 1-888-707-2465 or Email AZdocs@aaascholarships.org

This application is the ONLY chance you have to explain your household situation. Please use additional paper if needed to give us ALL the necessary information to determine your eligibility. All information must be disclosed NOW. Failure to fully document and complete this application WILL result in your application being denied. You will not be able to provide additional information after processing to change the decision of eligibility made based on the original application and documentation.

PARENT/GUARDIAN A Name: _____ SS# _____

2020-2021 AAA-ARIZONA K-12 Private School Tax Credit Scholarship Application - Page 4

G) TAXABLE INCOME

The 2019 federal tax return for our household was: ☐ Filed (Complete all of Section G) ☐ Not filed yet (See Required Documentation section)?
☐ I/We do not file. I/We only receive non-taxable assistance (Complete Section H and IRS Did Not File Statement on Page 8).

1) Total number of dependents listed on 2019 Form 1040	#
2) Total Income Reported on 2019 Form 1040 line 7b (Attach a hand-signed copy of the tax return, including all schedules	\$
3) Net business income* from self-employment, farm, rentals, and other businesses from Form 1040, Schedule 1, lines 3, 5, and 6 (Attach Schedules C, E, and/or F from your 2019 Form 1040)	\$

* Business losses will be adjusted to zero, and therefore, the total income will be adjusted accordingly to determine household eligibility.

H) NON-TAXABLE EARNINGS AND ASSISTANCE

List the total "ANNUAL" amount received by everyone in the household from 1/1/19-12/31/19. **DO NOT** list monthly amounts.

1) Child Support	\$	6) Cash Assistance for 2019 (TANF)	\$
2) Social Security Income (SSA/SSD, etc.) (Provide 2019 documentation for all recipients in household.)	\$	7) Food Stamps for 2019	\$
3) Other non-taxable income (Working for cash, Adoption and/or Foster Subsidy, Worker's Comp., Disability, Pension / Retirement, etc.)	\$	8) Housing Assistance for 2019 (Sec. 8, HUD, parsonage, etc.)	\$
4) Gifts from family and/or friends	\$	9) Loans from family and/or friends	\$
5) Personal Savings/Investment Accounts <u>used</u> for household expenses in 2019 (Do not include totals listed in Section I)	\$		

*You must provide 2019 documentation for items 2-9; either an official year-end statement or documentation showing totals from 1/1/19-12/31/19.

I) UNUSUAL CIRCUMSTANCE (tell us if your current circumstances are different from 2019)

<input type="checkbox"/> Loss of job	<input type="checkbox"/> Child support reduction	<input type="checkbox"/> Bankruptcy
<input type="checkbox"/> Recent separation/divorce	<input type="checkbox"/> Change in family living status	<input type="checkbox"/> Became eligible for disability insurance
<input type="checkbox"/> Change in work status	<input type="checkbox"/> Death in the household	<input type="checkbox"/> Became eligible for social security
<input type="checkbox"/> Income reduction	<input type="checkbox"/> Change in custody	<input type="checkbox"/> Other

Provide a brief explanation of the situation and attach documentation for all circumstances checked above:

BE SURE TO COMPLETE ALL PAGES OF THE APPLICATION, INCLUDING THE SIGNATURE PAGE (pg 5, section M)

Questions? Call 1-888-707-2465 or Email AZdocs@aaascholarships.org

This application is the ONLY chance you have to explain your household situation. Please use additional paper if needed to give us ALL the necessary information to determine your eligibility. All information must be disclosed NOW. Failure to fully document and complete this application WILL result in your application being denied. You will not be able to provide additional information after processing to change the decision of eligibility made based on the original application and documentation.

PARENT/GUARDIAN A Name: _____ SS# _____

2020-2021 AAA-ARIZONA K-12 Private School Tax Credit Scholarship Application - Page 5

K) HOW DID YOU HEAR ABOUT AAA SCHOLARSHIP PROGRAM?

- | | | |
|--|--|---|
| <input type="checkbox"/> Renewing Household | <input type="checkbox"/> Flyer, brochure or poster | <input type="checkbox"/> Internet Search |
| <input type="checkbox"/> Another scholarship parent | <input type="checkbox"/> At an event in my community | <input type="checkbox"/> Social Media (Facebook, Twitter, etc.) |
| <input type="checkbox"/> Referred by friend, family or work associate not on scholarship | <input type="checkbox"/> Newspaper ad or article | <input type="checkbox"/> Employer communication |
| <input type="checkbox"/> Referred by private school | <input type="checkbox"/> State Agency | <input type="checkbox"/> Other: TUC0305 |

L) CERTIFICATION AND AUTHORIZATION SIGNATURE(S)

- ✓ I certify that the information provided on the application and all supporting documentation submitted at any time is true, correct, and complete to the best of my knowledge. I understand that if I give information that is not true or if I withhold information and my child(ren) receive a scholarship for which they are not eligible, I can be lawfully punished for fraud, and the scholarship will be denied or revoked.
- ✓ I certify that no parent/guardian of a child(ren) on this application is an owner, operator, principal, or person with equivalent decision-making authority of an eligible private school or not at the school which my child(ren) will attend.
- ✓ I understand that any information I provide at any time will be verified, which may include computer file matching, public records search, IRS transcripts, and that I may be required to provide other information and/or documentation.
- ✓ I authorize the release of personal, financial, and educational information for the purpose of determining eligibility and for research.
- ✓ I understand that AAA Scholarship Foundation does not discriminate because of race, color, sex, age, disability, religion, nationality, sexual orientation, political affiliation, or gender identification or expression.
- ✓ I authorize AAA Scholarship Foundation and its application management system to make this form, the information therein and all supporting documentation available to the appropriate state agencies as required by the law governing the scholarship.
- ✓ I agree to follow the rules and responsibilities as they apply to the program as set forth in the Parent and School Handbook, available online at www.aaascholarships.org.
- ✓ I understand if I am deemed eligible and awarded a scholarship, that I am not automatically entitled to a scholarship in the following years.
- ✓ I understand that it is my responsibility to reapply and document my eligibility whenever I am required to if I accept a scholarship.
- ✓ I understand that it is my right and responsibility to read and understand a private school's admission and conduct policy before requesting to enroll my child(ren) into an eligible private school.
- ✓ I understand if I enroll my child(ren) into a private school before receipt of a Scholarship Award Letter and School Commitment Form (SCF), I will be responsible for their tuition, and the child(ren) may not qualify for future scholarship funding. I understand funding is not guaranteed.

A school tuition organization cannot award, restrict, or reserve scholarships solely based on a donor's recommendation. A taxpayer may not claim a tax credit if the taxpayer agrees to swap donations with another taxpayer to benefit either taxpayer's own dependent.

M) SIGNATURES (Must be handwritten. Electronic Signatures are not accepted.)

Parent/Guardian A _____ Date _____

Parent/Guardian B _____ Date _____

N) REQUIRED DOCUMENTATION

The application **MUST** include the following with the completed application (and any other documentation requested):

- ☐ Birth Certificates required for all household members 18 years old and under
- ☐ 2019 Hand-Signed Form 1040 (**No Electronic Signatures**). All Schedules/Forms & all Forms W-2 (**No Extensions Accepted**)
- ☐ 2019 Non-taxable Earnings and Assistance Documentation, if applicable (Ex: Food Stamps, Housing Assistance, etc.)
- ☐ Sworn Statement for IRS Did Not File Tax Return (**page 8**), if applicable (if you didn't file taxes)
- ☐ Letter/documentation of Unusual Circumstances, if needed
- ☐ Arizona Public School Attendance Form (**page 6**) or Report Card, if required
- ☐ Certificate of Eligibility to Transfer (**page 7**), if required

Mail All Pages of the Completed Application and Required Documentation to:

AAA Scholarship Foundation, P.O. Box 15719, Tampa, FL 33684-5719

Processing of applications is typically completed within 10-12 weeks once ALL required documentation is received.

To check the processing status of your application, go to https://webportalapp.com/sp/aaasf_2020

PARENT/GUARDIAN A Name: _____ SS# _____

Arizona Public School Attendance Form – Page 6

Unless your household is exempted from this requirement, (the student is entering kindergarten, is a renewing student or transferring from another STO [see page 7] or is part of a military household stationed in Arizona), either this form must be completed or the student's report card indicating that the student attended for at least 90 days in the prior school year must accompany this application. Make copies of this form if you have more than two students.

This form is to be completed by a representative of the public school or district in which the student attended in the 2019-20 school year.

Student name:		
Name of Public School and District:		
First day of the 2019-20 school year (mm/dd/yy)	Last day of the 2019-20 school year (mm/dd/yy)	
Dates this student attended during the 2019-20 school year (mm/dd/yy – mm/dd/yy)		Grade in 2019-20:
Student was enrolled for one full semester of the 2019-20 school year: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If NO, student was enrolled for _____ days of the 2019-20 school year.		
Name and Title of Individual Completing Form:		
Signature and Date:		

Student name:		
Name of Public School and District:		
First day of the 2019-20 school year (mm/dd/yy)	Last day of the 2019-20 school year (mm/dd/yy)	
Dates this student attended during the 2019-20 school year (mm/dd/yy – mm/dd/yy)		Grade in 2019-20:
Student was enrolled for one full semester of the 2019-20 school year: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If NO, student was enrolled for _____ days of the 2019-20 school year.		
Name and Title of Individual Completing Form:		
Signature and Date:		

Submit Form along with All Pages of the Completed Application and Required Documentation to:

Mail: AAA Scholarship Foundation, P.O. Box 15719, Tampa, FL 33684-5719, or
Email: AZdocs@aaascholarships.org, or **Upload (if the online application has not yet been submitted):**
https://webportalapp.com/sp/aaasf_20

Questions? Call 1-888-707-2465 or Email AZdocs@aaascholarships.org

PARENT/GUARDIAN A Name: _____ SS# _____

Arizona Certificate of Eligibility to Transfer – Page 7

This form is required if your student(s) is transferring to AAA from another Scholarship Tuition Organization (STO) and must be provided to AAA in order to complete the processing of your application. Make additional copies of this form if you have more than two students.

This form is to be completed by the STO that funded the student's scholarship **or** the school that received funding from the STO for that school year. **Incomplete forms will cause a delay in processing.**

I/We _____ (Parent/Guardian) give the School Tuition Organization (STO) or school permission to release information about my child(ren)'s scholarship history to AAA Scholarship Foundation, Inc.

Parent or guardian signature

STUDENT NAME: _____

DID THE STUDENT RECEIVE FUNDS FROM A SCHOOL TUITION ORGANIZATION? YES _____ NO _____

NAME OF AWARDING SCHOOL TUITION ORGANIZATION(S): _____

WHAT SCHOOL YEAR(S) DID THE STUDENT RECEIVE FUNDS? _____

AMOUNT RECEIVED BY SCHOOL: _____

STUDENT NAME (if additional) _____

DID THE STUDENT RECEIVE FUNDS FROM A SCHOOL TUITION ORGANIZATION? YES _____ NO _____

NAME OF AWARDING SCHOOL TUITION ORGANIZATION(S): _____

WHAT SCHOOL YEAR(S) DID THE STUDENT RECEIVE FUNDS? _____

AMOUNT RECEIVED BY SCHOOL: _____

*This certifies that the student(s) listed above was the recipient of a
Tax Credit Scholarship from an STO for the amounts and time periods listed above.*

Print Name of Authorized Representative Completing Form

Title

Name of Awarding School Tuition Organization (STO) or School Completing Form

Signature of Authorized Representative Completing Form

Date

Submit Form along with All Pages of the Completed Application and Required Documentation to:

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Email: AZdocs@aaascholarships.org, or **Upload (if the online application has not yet been submitted):**
https://webportalapp.com/sp/aaasf_20

Questions? Call 1-888-707-2465 or Email AZdocs@aaascholarships.org

PARENT/GUARDIAN A Name: _____ SS# _____

Sworn Statements for IRS Did Not File Tax Return – Page 8

INSTRUCTIONS: A sworn statement must be completed for **each** adult living in the household who did not file a 2019 Form 1040. Each person may be **REQUIRED** to provide documentation verifying their Did Not File status later this year. **EVERY** adult in the household who Did Not File taxes and is not claimed as a dependent on a provided Tax Return must complete one section of this form.

I, _____ did not file a tax return for the following reason (check one):

(PRINT NAME)

- ☐ I received no taxable income. My non-taxable earnings or assistance received was: \$ _____
- ☐ My taxable income received was less than the amount required for filing with the IRS. Amount received: \$ _____
- ☐ Other (explain) _____

I was NOT required to file a 2019 Federal Income Tax Return. In place of a tax return, I have completed this form and attached all earnings and assistance documentation. UNDER PENALTY OF PERJURY I DECLARE UNDER OATH THAT I DID NOT FILE A TAX RETURN FOR THE 2019 YEAR AND I UNDERSTAND THIS FORM ACTS AS MY VERIFICATION OF NON-FILING. I ALSO DECLARE UNDER OATH THAT ALL OF THE STATEMENTS HERE ARE TRUE AND COMPLETE.

Signature of Person Who Did Not File

Relationship to PARENT/GUARDIAN A/B

I, _____ did not file a tax return for the following reason (check one):

(PRINT NAME)

- ☐ I received no taxable income. My non-taxable earnings or assistance received was: \$ _____
- ☐ My taxable income received was less than the amount required for filing with the IRS. Amount received: \$ _____
- ☐ Other (explain) _____

I was NOT required to file a 2019 Federal Income Tax Return. In place of a tax return, I have completed this form and attached all earnings and assistance documentation. UNDER PENALTY OF PERJURY I DECLARE UNDER OATH THAT I DID NOT FILE A TAX RETURN FOR THE 2019 YEAR AND I UNDERSTAND THIS FORM ACTS AS MY VERIFICATION OF NON-FILING. I ALSO DECLARE UNDER OATH THAT ALL OF THE STATEMENTS HERE ARE TRUE AND COMPLETE.

Signature of Person Who Did Not File

Relationship to PARENT/GUARDIAN A/B

I, _____ did not file a tax return for the following reason (check one):

(PRINT NAME)

- ☐ I received no taxable income. My non-taxable earnings or assistance received was: \$ _____
- ☐ My taxable income received was less than the amount required for filing with the IRS. Amount received: \$ _____
- ☐ Other (explain) _____

I was NOT required to file a 2019 Federal Income Tax Return. In place of a tax return, I have completed this form and attached all earnings and assistance documentation. UNDER PENALTY OF PERJURY I DECLARE UNDER OATH THAT I DID NOT FILE A TAX RETURN FOR THE 2019 YEAR AND I UNDERSTAND THIS FORM ACTS AS MY VERIFICATION OF NON-FILING. I ALSO DECLARE UNDER OATH THAT ALL OF THE STATEMENTS HERE ARE TRUE AND COMPLETE.

Signature of Person Who Did Not File

Relationship to PARENT/GUARDIAN A/B

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