

Application for Financial Assistance under the Benevolent Fund, Inc.

Mission: The AICPA Benevolent Fund was established in 1933 by members of the American Institute of CPAs for the purpose of assisting AICPA members through temporary periods of financial difficulty. The Fund primarily provides temporary assistance with meeting daily subsistence (living) expenses, and medical and prescription expenses that exceed insurance coverage brought about by serious illness, an accident, or the death of the primary source of family income. The Fund also assists cases where AICPA members are facing financial hardships due to onset of natural disasters.

<u>Purpose of Application:</u> This application is necessary to apply for temporary financial assistance and one-time disaster relief from the AICPA's Benevolent Fund. Recipients are welcome to reapply after 6 months for additional temporary financial assistance to be reviewed by the AICPA Benevolent Fund Board of Trustees.

How do I apply for Assistance?

You will need to:

- ✓ Complete sections 1 through 18 in a **legible** manner (the Application is available online in writeable PDF format. The Fund encourages applicants to use this method). Section 19 is available for additional writing space.
- ✓ Sign the application.
- ✓ Provide the required documentation and/or verification items necessary to complete your application.
- ✓ Mail this application and all required documentation to the Fund Administrator at 220 Leigh Farm, Road, Durham, NC 27707.

Who is eligible to receive assistance?

- Current voting AICPA members.
- Surviving spouse of a person who was a current voting AICPA member, at the time of their death.
- Dependent children (under the age of 21) of a person who was a current voting AICPA member, at the time of their death.

All of the above persons must exhibit a financial need.



What will the Fund pay for?1

- Temporary monthly living
- Temporary medical, mental and prescription expense payments that exceed insurance coverage¹.
- Temporary Medicare, Medicaid or other health insurance premiums.
- Most medically necessary services for dependent children (under age 21).
- Disaster Relief can be applied towards (but not limited to): Living Expenses due to displacement, Insurance Deductibles, Additional Childcare, Deposits and Down payments, Contents Replacement.
- Other, as deemed appropriate by the Board of Trustees.

As you apply for assistance, you should know that:

- You may receive assistance from any person in order to help you complete the application and determination of eligibility.
- The information you provide to the Fund is kept in confidence.
- You may terminate Fund's assistance to you, at any time.
- The Fund does not discriminate against applicants on the basis of gender, age, disability, national origin, or any other characteristic protected by law.
- The Fund has the right to deny any application based on Applicant's failure to provide sufficient documentation.
- The Fund requests that Applicant's seeking disaster relief financial assistance also apply for other available resources, i.e. FEMA, SBA, etc.

What are the responsibilities of the applicant?

- Before seeking financial assistance from the Fund you must first apply for financial assistance from all other available sources, such as Unemployment, Social Security, Welfare, Food Stamps, Medicare and Veteran's Benefits.
- The Fund requests that while seeking disaster relief financial assistance from the Fund, you also apply for financial assistance from all other available sources, such as FEMA and SBA and those listed above as they apply.
- To provide to the Fund all requested information necessary to determine eligibility.
- To immediately inform the Fund in the event you receive benefits in error.

Application Specific Instructions

Section 1 – Applicant Data. This section is for the applicant, be it current AICPA member or spouse/immediate family member.

¹ The maximum assistance amount and duration of receipt shall be determined by the Fund's Trustees.



Section 2 – Additional Data. You can easily find the AICPA member ID number in three different locations:

- AICPA dues notice (upper right hand section under the due date).
- The mailing label on a recent issue of the Journal of Accountancy.
- AICPA membership card (front of card under member name).

Section 4 – Reason for Requesting Assistance. Identify your immediate need and how financial distress occurred and measures being taken to resolve need for financial aid. Disabled applicants should provide proof of disability in the form of a physician's statement.

For Disaster related events that may include deductibles that need to be met, amounts that have already been spent due to displacement or otherwise. Detail the amount of impact you have suffered from the natural disaster, assistance that you have applied and/or received or been denied, and notes regarding intentions to pay for reconstruction process. Photos may be included if desired.

Section 5 – Other Assistance. Provide proof if you receive assistance from other sources. Provide proof if you were denied assistance from the bureaus listed.

Section 6 & 7 – Applicant's Employment History. Submit your last two check stubs if currently employed or have been employed within the last 90 days.

Section 9 – Assets. Please attach the following, where applicable. If home is impacted by natural disaster, please provide values prior to event.

- ✓ Recent bank and/or brokerage statements.
- ✓ Executed life insurance policies, denoting face value or cash surrender value.
- ✓ Real Estate Document that illustrates; location, date acquired, original. purchase price and estimated market value for all real property owned.

Section 10 – Liabilities. Please attach the most recent copy of the following, where applicable.

- ✓ Home rent/mortgage statements.
- ✓ Home equity loan statements.
- ✓ Automobile or other personal property loan statements.
- ✓ Real Estate tax bill.
- ✓ Credit Card Statement.
- ✓ Medical bills.
- ✓ Other personal loans.



Section 12 - Monthly Cash Received. Please provide proof of all income that you list on the application, with the exception of assistance provided by the Fund.

Section 13 – Monthly Cash Payments. Please attach the most recent proof of payment of your listed expenses, where applicable. **You may provide estimates of your food cost. Please provide copies of bills/invoices to verify all information claimed in this section.**

Section 15 - Tax Information. Filed tax returns for all members of your household should be attached to this application. If tax returns were not filed a detailed explanation should be provided.

Section 17 - Signatures. Failure to sign all of the required authorizations/releases will render your application incomplete and ineligible for review.

Section 19 – Additional Notes. Please use this space if necessary to include additional notes from sections 4, 5, 11, 15 or otherwise.

Documentation Expectations for those impacted by Natural Disasters:

Please submit as much support documentation and best estimates as you have available for sections 5-15. If not provided at time of application, support documentation may be requested after the application is received.

Who can answer my questions about the Fund?

If you have questions that have not been answered on these instructions, please feel free to contact the fund administrator at 866-527-2228. The administrator may reach out for a phone interview to assist in quantifying the need.