



Application for Financial Disaster 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.

Purpose of Application

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 12 in a legible manner (the Application is available online in fillable PDF format. The Fund encourages applicants to use this method).
 - Section 12 – sign authorization of information
 - Section 13 is if someone other than the applicant filled out the application
 - Page 5 includes a Submission Checklist
- Provide the required documentation and/or verification items necessary to complete your application
 - Refer to bold items on Page 5
- Mail this application and all required documentation to:
AICPA Benevolent Fund
ATTN: Fund Administrator, Kati McDaniels
220 Leigh Farm Road
Durham, NC 27707
- Or fax your application to 919.419.4749
- *To protect your personal information, please do not email your application*

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

- 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, temporary loss of income
- Temporary monthly living and medical expenses
- 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 based on 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

What are the responsibilities of the applicant?

- Before applying to the Fund, we request that applicant's seeking disaster relief financial assistance, also apply for other available resources, i.e. FEMA, SBA, Red Cross, local/state agencies etc.
- Please also apply to other aides as applicable: Unemployment, Social Security, Welfare, Food Stamps, Medicare and Veteran's Benefits, etc.
- 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.

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)

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



Section 4 – Employment History

Submit your last two check stubs if currently employed or have been employed within the last 90 days. Please provide details if your office/workload was also impacted by disaster.

Section 5 – Details Regarding Financial Need

Provide description of circumstances for needing financial assistance, efforts made or being made to no longer be in deficit, photos of damaged property or possessions, additional information from insurance and other assistance.

Section 6 – Other Assistance

List insurance types, if contacted and amounts granted or denied. Also include information regarding other assistance and provide proof of awards granted or denied. **Please provide a general or formal estimate of damage and expected out-of-pocket expenses.**

Section 7 – Others Living in the Household

List any children, relatives or others that are living in your household.

Section 8 - Monthly Cash Received

Please provide proof of all income that you list on the application, where applicable.

Section 9 – Assets

Please attach the following, where applicable:

- Recent bank and/or brokerage statements
- Details of Automobiles (our value estimates would be based on Kelley Blue Book)
- Executed life insurance policies, denoting face value or cash surrender value
- If unable to provide Real Estate Document that illustrates: location, date acquired, original purchase price and estimated market value for all real property owned, please list source for current home value.

Section 10 – Monthly Payments

Please attach the most recent proof of payment of your listed expenses, as available. We recognize that monthly payments likely have changed from pre-disaster to post, i.e. temporary housing accommodations, etc., please list both values to the best of your ability. **Please provide copies of bills/invoices to verify all information claimed in this section.**



Section 11 – Liabilities

Please attach the most recent copy of the following, as available:

- Credit Card Statements, for the last three months
- Other Loan Statements
- Home rent/mortgage statements
- Home equity loan statements

Section 12 – Authorization

Failure to sign all required authorizations/releases will render your application incomplete and ineligible for review.

Section 13 – Filled out by Non-Applicant

If someone other than applicant is assisting with filling out the application, social worker, relative or other, please provide name and contact information.

Submission Checklist

Be sure to review all sections and provide required support documentations for reported numbers. If available, please include any formal damage assessments from contractors and/or insurers. Please also identify all documents and keep loose with application.

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** or **benevolent_fund@aicpa.org**. The administrators may reach out for a phone interview to assist in quantifying the need.