

### Guidelines for Completing the Parents' Financial Statement

The Parents' Financial Statement (PFS form) is used by Thomas Jefferson to assess a family's ability to pay tuition and related school costs each year. This form gathers your financial information regarding income, expenses, assets, and debts, and allows the school to analyze this information to make fair and objective financial aid decisions. Scholarships and financial assistance cannot be awarded to families until they have completed the PFS form and provided the required documentation to substantiate this financial information.

### Important Deadlines

**February** Families who currently have scholarships or financial aid awards will receive the PFS form from Thomas Jefferson in February so that they may gather the necessary information, complete the form, and return it to Thomas Jefferson timely.

**March** PFS forms must be completed and returned to Thomas Jefferson by March 8th so that the Financial Aid Committee will have time to review and make recommendations for awards by the end of March. Families who do not submit this application timely may jeopardize their student's enrollment at Thomas Jefferson. Thomas Jefferson budgets for financial assistance and once those funds have been awarded there may not be funds available for families who file late.

**April** All student enrollment contracts, including contracts for students on financial aid and/or scholarships, are issued the first of April and must be accepted and returned by May 1st. If you have not returned your financial aid application together with the supporting documentation, we cannot issue a contract and you may lose your student's spot in their class.

### Gathering Information

Types of Questions You'll Answer in the PFS	Information to have handy to answer these questions
<b>Questions about your family's income ("what you earn and receive")</b> You will answer questions about income that is taxed and income that is not taxed. Questions about "taxable income" cover salaries/wages earned by parents and children, alimony, and taxable dividends or interest income. Questions about "non-taxable" income cover child support, social security benefits, etc.	<ul style="list-style-type: none"> <li>* W-2 and/or 1099 form(s)</li> <li>* IRS Form(s) 1040 or 1040A</li> <li>* Social Security statements (SSA-1099 forms)</li> <li>* A sum of the child support you actually receive</li> </ul>
<b>Questions about the value of your assets ("what you own")</b> Be ready to answer questions about the value of your home and what you pay. The PFS will also ask you about the vehicles you own and about investments and retirement plan accounts.	<ul style="list-style-type: none"> <li>* Mortgage principal balance statements for your home(s)</li> <li>* Lease or finance statements showing the amount owed on vehicles</li> <li>* Bank, investment, and/or mutual fund statements</li> <li>* Retirement Plan account statements</li> </ul>
<b>Questions about your debts ("what you owe")</b> These include questions about the amount you owe on your credit cards, as well as other debt you have incurred.	<ul style="list-style-type: none"> <li>* Credit card statements</li> <li>* Bills/account statements showing major debt outstanding (for past educational expenses, past legal or funeral expenses, damage from natural disasters, etc.)</li> </ul>
<b>Questions about how much you pay for educational expenses for all your children (not just the children for whom you are applying for financial aid).</b> The PFS also asks HOW you pay for these expenses – that is from what sources (your own funds, loan, friends/family, etc.).	<ul style="list-style-type: none"> <li>* A sum of the expenses you pay for school, college, and childcare for EACH of your children.</li> </ul>
<b>Questions about other family expenses</b> These will include questions about medical and dental care expenses that weren't covered by insurance; and questions about cost of camps, lessons/tutors, and vacations.	<ul style="list-style-type: none"> <li>* A sum of the expenses you paid for medical/dental premiums, as well as non-reimbursed amounts</li> <li>* A sum of expenses for camps/lessons/tutors</li> <li>* A sum of the expenses for vacations taken by all members of the family</li> </ul>

### Additional Resources

Instructions for completing the PFS form are available on our website at [www.tjeffschool.org](http://www.tjeffschool.org) under Admissions - Financial Assistance. All fields on the PFS are required to be completed and these instructions explain what should be included. The PFS form is also located there if you need additional copies. Other questions may be directed to Debie Donica, Business Manager by email at [ddonica@tjeffschool.org](mailto:ddonica@tjeffschool.org).

**Please complete the PFS form, sign, and return with documentation to Thomas Jefferson.**

Enter names exactly as they appear on tax/official forms. Questions marked with an asterisk (\*) are CRITICAL - Your PFS cannot be accepted without these filled in.

**A. Household Information**

**1. Parent/Guardian A**

First Name\* \_\_\_\_\_ MI \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Address \_\_\_\_\_ Suite/Apt. No. \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_  
 Country \_\_\_\_\_ Date of Birth\* (mmddyy) \_\_\_\_\_  
 Email \_\_\_\_\_ Gender  M  F  
 Phone \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
 Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Yrs w Employer \_\_\_\_\_

Parent/Guardian A will be our primary contact. Please provide phone and email address should we need to contact you.

**1. Parent/Guardian B**

First Name\* \_\_\_\_\_ MI \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Address \_\_\_\_\_ Suite/Apt. No. \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_  
 Country \_\_\_\_\_ Date of Birth\* (mmddyy) \_\_\_\_\_  
 Email \_\_\_\_\_ Gender  M  F  
 Phone \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
 Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Yrs w Employer \_\_\_\_\_

**2. Other Parent**

If the applicant(s) has another living biological or legal (adoptive) parent not listed in Question 1, indicate the relationship between the parents.

Never Married  Divorced  Separated, no court action  Separated, legally \_\_\_\_\_ Yr of divorce/separation \_\_\_\_\_  
 Other parent's first name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_  
 Address \_\_\_\_\_ Is there a Joint Custody Agreement?  Yes  No  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

**B. Student Applicant Information Complete this section for each child applying to the school.**

**3. Applicant A**

First Name\* \_\_\_\_\_ MI \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Date of Birth\* (mmddyy) \_\_\_\_\_ Grade applicant will enter in August 2019 \_\_\_\_\_

4. Applicant lives with  Parent/Guardian A&B  Parent/Guardian A  Parent/Guardian B  Other

**3. Applicant B**

First Name\* \_\_\_\_\_ MI \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Date of Birth\* (mmddyy) \_\_\_\_\_ Grade applicant will enter in August 2019 \_\_\_\_\_

4. Applicant lives with  Parent/Guardian A&B  Parent/Guardian A  Parent/Guardian B  Other

**3. Applicant C**

First Name\* \_\_\_\_\_ MI \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Date of Birth\* (mmddyy) \_\_\_\_\_ Grade applicant will enter in August 2019 \_\_\_\_\_

4. Applicant lives with  Parent/Guardian A&B  Parent/Guardian A  Parent/Guardian B  Other

**3. Applicant D**

First Name\* \_\_\_\_\_ MI \_\_\_\_\_ Last Name\* \_\_\_\_\_  
 Date of Birth\* (mmddyy) \_\_\_\_\_ Grade applicant will enter in August 2019 \_\_\_\_\_

4. Applicant lives with  Parent/Guardian A&B  Parent/Guardian A  Parent/Guardian B  Other

**Family Income**

Use 2018 tax return or estimates if your taxes for the year in question have not yet been filed.

**6. Basic Tax Information**

- 6A Have you completed your 2018 Tax Return?  Yes  No
- 6B Income tax filing status for 2018:  
 1. Single  2. Married, joint return  3. Married, filing separately  4. Head of Household  5. Do not file
- 6C How many federal income tax exemptions did you or will you claim for 2018? \_\_\_\_\_
- 6D What did you or will you report as your total itemized deductions for IRS Schedule A? \_\_\_\_\_

**7. Total Taxable Income**

	2018	Estimated 2019
7A Salaries and wages for Parent/Guardian A (Refer to W-2 form(s))	\$ _____	\$ _____
7B Salaries and wages for Parent/Guardian B	\$ _____	\$ _____
7C Taxable dividends and/or interest income (Refer to your 1099 statement(s).)	\$ _____	\$ _____
7D Alimony received (Do not include child support.)	\$ _____	\$ _____
7E Other taxable income (See guidance in Instruction Booklet.)	\$ _____	\$ _____
7F Pre-tax payments made into an Individual Retirement Account (IRA)	\$ _____	\$ _____
7G Payments made into a Keogh plan and/or Simplified Employee Pension plan (SEP)	\$ _____	\$ _____
7H Other IRS allowable adjustments to taxable income	\$ _____	\$ _____

**Business and/or Farm Details** Complete this section only if you own a business and/or farm. Be sure to include a copy of your completed IRS Schedule C and/or F when you return this form.

- 7I Net profit/loss from business and/or farm (If loss, use parentheses around figures. Do not use a negative sign.) \$ \_\_\_\_\_ \$ \_\_\_\_\_
- 7J Owner of the business and/or farm: (select only one)  Parent/Guardian A and B  Parent/Guardian A  Parent/Guardian B
- 7K Type of business and/or farm \_\_\_\_\_
- 7L Percentage of Ownership \_\_\_\_\_%      7M Business/Farm Assets \$ \_\_\_\_\_      7N Business/Farm Debts \$ \_\_\_\_\_
- 7O Total depreciation claimed on business and/or farm property assets \$ \_\_\_\_\_

**8. Total Nontaxable Income**

- 8A Child support received for all children \$ \_\_\_\_\_ \$ \_\_\_\_\_
- 8B Social security benefits received by all members of your household \$ \_\_\_\_\_ \$ \_\_\_\_\_
- 8C Other Nontaxable Income

Total pre-tax payments made to tax-deferred pension and savings plans as reported on W-2 form(s) (Box 12). Include amounts withheld from earnings for qualified retirement plans, such as 401(k) and 403(b) plans		
	\$ _____	\$ _____
Total pre-tax contributions you made to a cafeteria or 125 plan		
	\$ _____	\$ _____
Total untaxed income your employer provided to a fringe benefit plan, such as HSA's		
	\$ _____	\$ _____
Total of all cash support, gifts, tuition paid on behalf, or money paid to you by relatives or non-relatives		
	\$ _____	\$ _____
Total amount paid or provided by separated or divorced spouse (in lieu of child support) to cover household expenses		
	\$ _____	\$ _____
Total value of military or clergy allowances you receive for housing, food, or other living expenses		
	\$ _____	\$ _____
Total value of earned income credits, welfare benefits, veteran's benefits, and worker's compensation received		
	\$ _____	\$ _____
Total income received from tax-exempt investments		
	\$ _____	\$ _____
Total income earned abroad		
	\$ _____	\$ _____
Other nontaxable income and benefits not included above		
	\$ _____	\$ _____
<b>8C Total Other Nontaxable Income</b>	<b>\$ _____</b>	<b>\$ _____</b>

**D. Family Assets and Debts**

10. Real Estate - If you own the home you currently live in, complete questions 10 A - I.

10A Year purchased	10B Purchase price	10C Present market value	10D Unpaid principal on 1st mortgage	10E Annual payments on 1st mortgag (Monthly pymt x 12)
_____	\$ _____	\$ _____	\$ _____	\$ _____

10F Do you have a second mortgage or home equity loan?  Yes  No

10G If yes, describe the purpose of the second mortgage \_\_\_\_\_

10H Unpaid principal on 2nd mortgag/equity loan(s) \$ \_\_\_\_\_ 10I Annual payments on 2nd mortgag/equity loans \$ \_\_\_\_\_

10J If you own property other than your primary home, complete questions 10K - 10O. Please specify the address and purpose for each property.

10K Purchase price	10L Present market value	10M Unpaid principal on 1st mortgage	10N Annual payments on 1st mortgag
\$ _____	\$ _____	\$ _____	\$ _____

10O Number of locations and addresses of properties \_\_\_\_\_

	2018	Estimated 2019
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11. If you pay rent on the home you currently live in, provide the Total amount you paid/will pay in rent for the whole year \$ \_\_\_\_\_ \$ \_\_\_\_\_

Vehicles - Describe all vehicles you own.

12. Family cars owned or leased.	Provided by employer/business	Current Debt (if own)	Annual lease (if lease)
1. (make,model,year) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____	\$ _____
2. (make,model,year) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____	\$ _____
3. (make,model,year) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____	\$ _____

13. Boats or other recreational vehicles owned or leased (make, model, year) \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Other Assets/Debts - See Instruction Booklet for more detail on what should be reported.

14. Bank accounts - total value of both parents' checking and savings (interest-bearing and noninterest bearing) accounts \$ \_\_\_\_\_

15. Investments - total net value of all your investments (Include stocks, bonds, mutual funds, and value of whole life insurance policies.) \$ \_\_\_\_\_

16. Is there an employee retirement plan for: Parent/Guardian A  Yes  NO 16A Total value of Parents'/Guardians' Parent/Guardian B  Yes  NO IRAs, pensions, and other retirement plans. \$ \_\_\_\_\_

17. Total outstanding debt (includes past parent education debt, legal expenses, etc. \$ \_\_\_\_\_ 17A Amount in 17 to be paid during 2019 \$ \_\_\_\_\_

18. Total consumer debts (include balances from all credit card purchases NOT reported elsewhere in this form.) \$ \_\_\_\_\_

Other Expenses/Unusual Expenses

	2018	Estimated 2019
22. Total medical/dental expenses not reimbursed by insurance companies	\$ _____	\$ _____
23. Total paid for medical/dental insurance premiums	\$ _____	\$ _____
24. Unusual expenses - please detail below (see lists of acceptable expenses in the Instruction Booklet.)	\$ _____	\$ _____
25. Total annual fees/clubs dues	\$ _____	\$ _____
26. Total amount paid for camps and lessons for all members in your household	\$ _____	\$ _____
27. Total amount paid for vacations for all members in your household	\$ _____	\$ _____

Notes: Use this space to provide additional information or explanation as needed.

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**E. Additional Family Information - Please be sure to complete this section**

The questions in this section will help better assess your full obligation to pay tuition and other educational expenses. Please be realistic about the amount you can contribute, keeping in mind that the primary responsibility for paying for your child's education lies with you.

19. How many children are/will be receiving support from you in 2019? \_\_\_\_\_ 19A. How many will attend tuition-charging institutions? \_\_\_\_\_

For each of your children, if you pay money for childcare, school or college, specify those expenses below.

**Applicant A**

Applicant's Name \_\_\_\_\_ Amount you can pay for this student for tuition for 2019-2020 \$ \_\_\_\_\_

Amount paid for Educational expenses for 2018-19 \_\_\_\_\_ Paid to \_\_\_\_\_

Who will provide funding for educational expenses for this applicant for 2019-2020? (Please enter amount to be paid by each source)

\$ \_\_\_\_\_ Parents \$ \_\_\_\_\_ Student's assets \$ \_\_\_\_\_ Grandparents/Relatives \$ \_\_\_\_\_ Loans \$ \_\_\_\_\_ Other Sources

**Applicant B**

Applicant's Name \_\_\_\_\_ Amount you can pay for this student for tuition for 2019-2020 \$ \_\_\_\_\_

Amount paid for Educational expenses for 2018-19 \_\_\_\_\_ Paid to \_\_\_\_\_

Who will provide funding for educational expenses for this applicant for 2019-2020? (Please enter amount to be paid by each source)

\$ \_\_\_\_\_ Parents \$ \_\_\_\_\_ Student's assets \$ \_\_\_\_\_ Grandparents/Relatives \$ \_\_\_\_\_ Loans \$ \_\_\_\_\_ Other Sources

**Applicant C**

Applicant's Name \_\_\_\_\_ Amount you can pay for this student for tuition for 2019-2020 \$ \_\_\_\_\_

Amount paid for Educational expenses for 2018-19 \_\_\_\_\_ Paid to \_\_\_\_\_

Who will provide funding for educational expenses for this applicant for 2019-2020? (Please enter amount to be paid by each source)

\$ \_\_\_\_\_ Parents \$ \_\_\_\_\_ Student's assets \$ \_\_\_\_\_ Grandparents/Relatives \$ \_\_\_\_\_ Loans \$ \_\_\_\_\_ Other Sources

**Applicant D**

Applicant's Name \_\_\_\_\_ Amount you can pay for this student for tuition for 2019-2020 \$ \_\_\_\_\_

Amount paid for Educational expenses for 2018-19 \_\_\_\_\_ Paid to \_\_\_\_\_

Who will provide funding for educational expenses for this applicant for 2019-2020? (Please enter amount to be paid by each source)

\$ \_\_\_\_\_ Parents \$ \_\_\_\_\_ Student's assets \$ \_\_\_\_\_ Grandparents/Relatives \$ \_\_\_\_\_ Loans \$ \_\_\_\_\_ Other Sources

**Required Documentation**

The following documents must be submitted with this application for consideration.

Please provide the following forms for tax year 2018

\_\_\_\_\_ Form 1040, 1040A, or 1040EZ, including Schedule A, B, C, E, F and other supplemental forms

\_\_\_\_\_ All W-2 forms

**Parents Certification and Authorization**

We declare that the information reported on this form, to the best of our knowledge and belief, is true and correct, and complete. We recognize that intentionally providing false or inaccurate data may impact our ability to receive any financial aid and/or our ability to maintain a contract with the school.

Parent/Guardian A Signature \_\_\_\_\_

Parent/Guardian B Signature \_\_\_\_\_