



COMMON WEALTH
CHARITABLE MANAGEMENT

CAREER & TECHNOLOGY CENTER SCHOLARSHIPS

NOW AVAILABLE!

FIRST COME,
FIRST SERVED.
APPLY NOW!

To be eligible for this scholarship, students must reside in Pennsylvania and in a household with an adjusted gross income of up to \$108,400 plus \$19,000 for each dependent listed on the family federal 1040 tax return.

Students in 9th through 12th grade in the 2024-2025 school year are eligible. The number of scholarships is limited.

3 UPLOAD A COPY OF THE 2023 1040 FEDERAL TAX RETURN

Upload a copy of the 2023 1040 Federal tax return of the **person who claimed the student as a dependent. Include the entire page that lists the year of filing, filers names, dependents that list the applicant and adjusted gross income.** Applications will not be processed without this information. For special circumstances, please contact applicant@commonwealthcharitable.org.

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IT'S EASY TO APPLY!
GO TO: [APPLY.EITCNOW.ORG](https://apply.eitcnnow.org)



COMMON WEALTH
CHARITABLE MANAGEMENT

Log in or register

Email

Commonwealth Charitable Management

Parents - start here

- 1 Register for an account. The parent or guardian must enter a valid email address to create an account. You will receive an email with a code.
- 2 Create an account using a valid email address for the parent or guardian. All correspondence will be done via email.
- 3 Click Submit when your application is complete.
- 4 Incomplete applications will be removed from the system.
- 5 All information submitted will remain confidential.

For any questions, please contact us via email.

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COMPLETE THE SHORT
ONLINE APPLICATION

Submit a separate application for every student.

1040 Department of the Treasury - Internal Revenue Service
U.S. Individual Income Tax Return 2023
OMB No. 1545-0047 835 Use Only - Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2023, or other tax year beginning 2023, ending 20

Your first name and middle initial Last name **Your social security number**

If joint return, spouse's first name and middle initial Last name **Spouse's social security number**

Home address (number and street), if you have a P.O. box, see instructions. **Apt. no.** **Presidential Election Campaign**
City, town, or post office. If you have a foreign address, also complete spaces below. **State** **ZIP code** Check here if filing jointly, want \$3 to go to the fund. Checking a box below will not change your tax or refund.

Foreign country name **Foreign province/state/country** **Foreign postal code** Yes Spouse

Filing Status Single Head of household (HOH)
 Married filing jointly (even if only one had income) Married filing separately (MFS) Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent.

Digital Assets At any time during 2023, did you: (a) receive (as a reward, interest, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No

Standard Deduction Business car claim: You as a dependent Your spouse as a dependent

Annulment/Divorce Was born before January 2, 1959 Annulment Spouse Was born before January 2, 1959 Is blind

Dependents (see instructions): (i) First name Last name (ii) Social security number (iii) Relationship to you (iv) Check the box if question for (see instructions) Child tax credit Credit for other dependents

Income	1a Total amount from Form(s) W-2, box 1 (see instructions)	1b
	b Household employee wages not reported on Form(s) W-2	1b
	c Tip income not reported on line 1a (see instructions)	1c
	d Medical waiver payments not reported on Form(s) W-2 (see instructions)	1d
	e Taxable dependent care benefits from Form 2441, line 25	1e
	f Employer-provided adoption benefits from Form 8833, line 23	1f
	g Wages from Form 8919, line 8	1g
	h Other earned income (see instructions)	1h
	i Nontaxable combat pay election (see instructions)	1i
	Add lines 1a through 1i	1j
	2a Tax-exempt interest	2a
	2b Qualified dividends	2b
	2c IRA distributions	2c
	2d Pensions and annuities	2d
	2e Social security benefits	2e
	2f	2f
	2g	2g
	2h	2h
	2i	2i
	2j	2j
	2k	2k
	2l	2l
	2m	2m
	2n	2n
	2o	2o
	2p	2p
	2q	2q
	2r	2r
	2s	2s
	2t	2t
	2u	2u
	2v	2v
	2w	2w
	2x	2x
	2y	2y
	2z	2z
	3 Taxable amount	3
	4 Taxable amount	4
	5 Taxable amount	5
	6 Taxable amount	6
	7 Capital gain or (loss) Attach Schedule D if required. If not required, check here <input type="checkbox"/>	7
	8 Additional income from Schedule 1, line 10	8
	9 And lines 1r, 2s, 3d, 4e, 5f, 6h, 7, and 8. This is your total income	9
	10 Adjustments to income from Schedule 1, line 28	10
	11 Subtract line 10 from line 9. This is your adjusted gross income	11
	12 Taxable income	12
	13 Qualified business income deduction from Form 8895 or Form 8995-A	13
	14 Add lines 12 and 13	14

applicant@commonwealthcharitable.org