

CORPORATION INFORMATION

(as it would appear on your AZ corporate income tax return)

Corporation Name: _____

Corporation Address: _____

Street

City

State

Zip Code

Corporate EIN: _____

Is this an S corporation pursuant to A.R.S. § 43-1089.04?

(Check one.)

Yes. No.

Name & EIN of parent S corporation if contributing company is a qualified subchapter

S subsidiary: _____

Does this corporation pay insurance premium tax (rather than corporate income tax)? (Check one.)

Yes, the NAIC number is _____.

No.

Contact Name: _____

First

Last

Contact Phone Number: _____

Contact Email: _____

DONATION DETAILS

Which tax credit do you wish to take? (Check one.)*

Low-Income (A.R.S. § 43-1183)

Disabled-Displaced (A.R.S. § 43-1184)

*If you wish to benefit both programs, please fill out a separate pledge for each.

Do you wish to recommend a specific school? (Check one.)

Yes. School Name: _____

No, please allocate funding to students with the greatest need.

Amount corporation is requesting to donate: \$ _____

Submit this pledge by **June 30th**, so we can submit your donation for approval in July.

A.R.S. § 43-1089 NOTICE: A school tuition organization cannot award, restrict or reserve scholarships solely on the basis of donor 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.

CORPORATE DONATION PLEDGE