

Appendix I

EITC Business Applications

In regards to the Appendix I

SO and EIO applications, one or both may be submitted, per type of organization that the business would like to make its contribution. The combined total may not exceed \$300,000 in tax credits.

Appendix I - SO

Business Application for Scholarship Organization Contribution

Appendix I - EIO

Business Application for Educational Improvement Organization Contribution

Appendix I - PKSO

Business Application for Pre-Kindergarten Scholarship Organization Contribution

Appendix I – PKSO may be submitted individually or with Appendix I - SO and/or Appendix I - EIO. The maximum tax credits that may be earned from an approved PKSO contribution may not exceed \$150,000 per year.

Appendix I - SO

Application for Educational Improvement Tax Credits (Scholarship Org)

Business Name:		FEIN:	
Address:			
City:		State:	
Zip Code:		County:	
Business Description:		NAICS Code*:	
CEO Name:		CEO Title:	
Contact Name:		Contact Title:	
Contact Phone #:		Contact Fax #:	
Contact E-mail Address:			
Business Tax Year End (MM/DD):		PA Corporate Tax Account ID #:	— — — — - — — —

Amount to be donated per year to a scholarship organization(s): \$ _____

Based on the contribution stated above, this application is for the following commitment:

- Year 1 of a 1 Year Commitment (75% Tax Credit)
- Year 1 of a 2 Year Commitment (90% Tax Credit)
- Year 2 of a 2 Year Commitment (90% Tax Credit)

Calculated amount of tax credits requested per year: \$ _____

- If the contribution will be personal property or services, please check here and attach a separate typed page describing the property or service and appropriate information establishing the value of the contribution.

Please check the taxes to which the business is subject (*check all that apply*).

- Corporate Net Income Tax
- Bank & Trust Company Shares Tax
- Insurance Premiums Tax
- Personal Income Tax of S Corporation Shareholders, or partners in a general or limited partnership
- Capital Stock Franchise Tax
- Title Insurance Company Shares Tax
- Mutual Thrift Institutions Tax

I hereby certify that all information contained herein is true and correct to the best of my knowledge. I acknowledge that tax credits will be awarded only for approved contributions made to Scholarship Organizations listed by the Department (DCED) at www.newPA.com/EITC. I am aware that contributions must be made within 60 days of the date on the approval letter and receipts must be forwarded to DCED by the business within 90 days of approval. Furthermore, I acknowledge that if I knowingly make false statement to obtain tax credits, I (company, entity and signer) may be subject to criminal prosecution.

Signature: _____

Date: _____

Print Name: _____

Title: _____

* A NAICS code search can be done at www.NAICS.com

Appendix I - EIO

Application for Educational Improvement Tax Credits (Educational Improvement Org)

Business Name:		FEIN:	
Address:			
City:		State:	
Zip Code:		County:	
Business Description:		NAICS Code*:	
CEO Name:		CEO Title:	
Contact Name:		Contact Title:	
Contact Phone #:		Contact Fax #:	
Contact E-mail Address:			
Business Tax Year End (MM/DD):		PA Corporate Tax Account ID #:	— — — — - — — —

Amount to be donated per year to an educational improvement organization(s): \$ _____

Based on the contribution stated above, this application is for the following commitment:

- Year 1 of a 1 Year Commitment (75% Tax Credit)
- Year 1 of a 2 Year Commitment (90% Tax Credit)
- Year 2 of a 2 Year Commitment (90% Tax Credit)

Calculated amount of tax credits requested per year: \$ _____

- If the contribution will be personal property or services, please check here and attach a separate typed page describing the property or service and appropriate information establishing the value of the contribution.

Please check the taxes to which the business is subject (*check all that apply*).

- Corporate Net Income Tax
- Bank & Trust Company Shares Tax
- Insurance Premiums Tax
- Personal Income Tax of S Corporation Shareholders, or partners in a general or limited partnership
- Capital Stock Franchise Tax
- Title Insurance Company Shares Tax
- Mutual Thrift Institutions Tax

I hereby certify that all information contained herein is true and correct to the best of my knowledge. I acknowledge that tax credits will be awarded only for approved contributions made to Educational Improvement Organizations listed by the Department (DCED) at www.newPA.com/EITC. I am aware that contributions must be made within 60 days of the date on the approval letter and receipts must be forwarded to DCED by the business within 90 days of approval. Furthermore, I acknowledge that if I knowingly make false statement to obtain tax credits, I (company, entity and signer) may be subject to criminal prosecution.

Signature: _____

Date: _____

Print Name: _____

Title: _____

* A NAICS code search can be done at www.NAICS.com

Appendix I - PKSO

Application for Pre-Kindergarten Tax Credits

Business Name:		FEIN:	
Address:			
City:		State:	
Zip Code:		County:	
Business Description:		NAICS Code*:	
CEO Name:		CEO Title:	
Contact Name:		Contact Title:	
Contact Phone #:		Contact Fax #:	
Contact E-mail Address:			
Business Tax Year End (MM/DD):		PA Corporate Tax Account ID #:	— — — — - — — —

Amount to be donated per year to a Pre-K Scholarship organization(s): \$ _____

Pre-K Scholarship Tax Credits are calculated as follows: 100% credit for the first \$10,000 and 90% credit thereafter, up to a maximum tax credit of \$100,000.

Calculated amount of tax credits requested: \$ _____

- If the contribution will be personal property or services, please check here and attach a separate typed page describing the property or service and appropriate information establishing the value of the contribution.

Please check the taxes to which the business is subject (*check all that apply*).

- | | |
|---|---|
| <input type="checkbox"/> Corporate Net Income Tax | <input type="checkbox"/> Capital Stock Franchise Tax |
| <input type="checkbox"/> Bank & Trust Company Shares Tax | <input type="checkbox"/> Title Insurance Company Shares Tax |
| <input type="checkbox"/> Insurance Premiums Tax | <input type="checkbox"/> Mutual Thrift Institutions Tax |
| <input type="checkbox"/> Personal Income Tax of S Corporation Shareholders, or partners in a general or limited partnership | |

I hereby certify that all information contained herein is true and correct to the best of my knowledge. I acknowledge that tax credits will be awarded only for approved contributions made to Pre-K Scholarship Organizations listed by the Department (DCED) at www.newPA.com/EITC. I am aware that contributions must be made within 60 days of the date on the approval letter and receipts must be forwarded to DCED by the business within 90 days of approval. Furthermore, I acknowledge that if I knowingly make false statement to obtain tax credits, I (company, entity and signer) may be subject to criminal prosecution.

Signature: _____

Date: _____

Print Name: _____

Title: _____

* A NAICS code search can be done at www.NAICS.com