

Please complete and return this form with submission of your contribution, on a business check, along with a copy of the DCED approval letter. Check should be made payable to **Foundation for Jewish Day Schools** and mailed to **2100 Arch Street, Philadelphia, PA 19103**. This form and DCED approval letter can accompany the contribution check in the mail OR sent via email to ematz@jewishphilly.org.

Questions: Ellen Horowitz Matz, Director, Educational Tax Credit Programs, at the email above or 215-832-0525.

Company Name _____

Entity Type: Partnership S-Corp. C-Corp. LLC LLP SPE Other, please explain _____

Contact Name _____ Title _____

Phone _____ Email _____

Name of person who determines school designation, if different from above:

Name _____ Title _____

Phone _____ Email _____

■ **EIO 2019-2020 DONATION** Total Donation \$ _____

■ **APPLICATION YEAR STATUS**

First year of two year application Second year of two year application One year application

■ **PLEASE SELECT ORGANIZATION(S) and SPECIFY AMOUNT FOR EACH ONE**

- Jewish Community Relations Council, Youth Symposium on the Holocaust \$ _____
- Philadelphia Holocaust Remembrance Foundation Educational Program* \$ _____
- National Museum of American Jewish History Educational Programs* \$ _____
- JEVS Building Trades Career Exploration* \$ _____

■ **ACKNOWLEDGEMENT/RECOGNITION – Please check ALL that apply- IMPORTANT NOTE: If the business will be taking this contribution as a federal deduction, US Treasury/IRS regulations now stipulate that it must be deemed an *ordinary and necessary business expense*. As such, we recommend you select #3 or #4 as your acknowledgement/recognition option.**

The Individual School and the Foundation for Jewish Day Schools may...

- #1 Not recognize my gift other than in documents required by law. (anonymous)
- #2 Know my company/personal name for administrative purposes only, but not publicly recognize my gift.
- #3 Know my company/personal name, and may recognize my gift within the school community only.
- #4 Recognize my company/personal name beyond the school community, by FJDS, and include in public notifications (e.g. newspapers, publications, advertisements, etc.)

AND

- #5 *In the future, should Jewish Federation create a recognition process, I would like to be notified. (This notifies the Jewish Federation of your interest in enhanced recognition, should such an opportunity be created.)*

■ **IMPORTANT - I would like my donation to be recognized using the following name:**

Business Name and/or Preferred Personal Name (Required) _____

■ _____
Signature (Required) Print Name (Required) Date

*A % of net proceeds will be directed to the Youth Symposium on the Holocaust Program and/or scholarships at local Jewish day schools.