SO (K-12 EITC) 2024-2025
DONATION DATA CONFIRMATION

PAYMENT INSTRUCTIONS: Wire transfer of your **EITC/SO** contribution is preferred and should be directed as follows: ***Bank Name - Firstrust Bank; Bank Address - 1515 Market Street Philadelphia, PA 19102; ABA # - 236073801; Account Name - Foundation for Jewish Day Schools of Greater Philadelphia – FJDS ; Account # - 1000521335***. In addition, please complete and return this form and a copy of the DCED approval letter via email together to ematz@jewishphilly.org. Please notify me when the wire transfer is initiated. If wire transfer is not possible, checks should be made payable to **Foundation for Jewish Day Schools** and mail to **(NEW ADDRESS) 2 Commerce, 2001 Market St - 23rd Floor, Philadelphia, PA 19103.**

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

Company Name _____ Entity: ☐ Partnership ☐ S-Corp. ☐ C-Corp. ☐ LLC ☐ LLP ☐ SPE

Contact Name _____ Title _____
Phone _____ Email _____

Name of person who determines school designation, if different from above:
Name _____ Title _____
Phone _____ Email _____

■ **K-12 EITC 24-25 CONTRIBUTION** Total Amount $ _____

■ **APPLICATION YEAR STATUS**

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

■ **PLEASE SELECT DAY SCHOOL PROGRAM(S) AND SPECIFY AMOUNT PER SCHOOL**

☐ Undesignated: Any Qualifying Day School..... $_____
☐ Abrams Hebrew Academy ..... $_____
☐ Jack M. Barrack Hebrew Academy..... $_____
☐ Caskey Torah Academy..... $_____
☐ Cheder Chabad ..... $_____
☐ Kohelet Yeshiva High School..... $_____
☐ I.S. Kosloff Torah Academy Girls High School ..... $_____
☐ The Mesivta High School.....$ _____
☐ OROT: Special Needs Initiative..... $ _____
☐ Raymond and Ruth Perelman Jewish Day School... $ _____
☐ Politz Hebrew Academy ..... $ _____
☐ Talmudical Yeshiva of Philadelphia..... $ _____
☐ Yeshiva Ketana ..... $ _____

☐ Synagogue Kindergarten Program: Name _____ ..... $_____

■ **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 ☐ I would like the **Jewish Federation of Greater Philadelphia** to be made aware that I participate in the EITC program. (Note: This process is in development)

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

Business Name and/or Preferred Personal Name (required) _____
Address and/or Email for School Communications _____
_____

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