

Signature (Required)

PKSO (PRE-K EITC) 2024-2025 DONATION DATA CONFIRMATION

PAYMENT INSTRUCTIONS: Wire transfer of your PKSO 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—Pre-K; Account # - 1000521343. 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 mailed to (NEW ADDRESS) 2 Commerce, 2001 Market St - 23rd Floor, Philadelphia, PA 19103

| Company Name | | |
|--|--|------------------------------------|
| Entity Type: Partnership S-Corp. C-Corp. LLC LLP SPE | | |
| Contact Name | | |
| Phone | | |
| Name of person who determines school designation, if different from | m above: | |
| Name | Title | |
| Phone | Email | |
| PRE-K EITC 2024-2025 CONTRIBUTION Total Contribution \$ | | |
| APPLICATION YEAR STATUS ☐ 1 st year of 2-year application | \Box 2 nd year of 2-year application | ☐ 1 year application |
| PLEASE SELECT DAY SCHOOL PROGRAM(S) AND SPECIFY AMOUNT P | PER SCHOOL | |
| ☐ Undesignated: Any Qualifying Pre-K Program .\$ | ☐ Kaiserman JCC | \$ |
| ☐ Abrams Hebrew Academy\$ | ☐ Kesher Israel Congregation | \$ |
| ☐ Adath Israel\$ | ☐ Kol Emet | \$ |
| ☐ Beth Sholom Congregation\$ | ☐ Main Line Reform Temple | \$ |
| ☐ Beth Tikvah B'nai Jeshurun\$\$ | ☐ Perelman Jewish Day School (Pre-K). | |
| ☐ Caskey Torah Academy of Greater Philadelphia\$ | ☐ Old York Road Temple-Beth Am | |
| ☐ Center City Pre-School (B'nai Abraham)\$ | ☐ Shir Ami | \$ |
| ☐ Chabad of the Main Line\$ | ☐ Temple Beth Hillel - Beth El | |
| ☐ Cheder Chabad\$ | ☐ Temple BZBI | \$ |
| ☐ Congregation Adath Jeshurun\$ | ☐ Temple Judea of Bucks County | \$ |
| ☐ Congregation Beth Solomon\$ | ☐ Temple Sholom in Broomall | \$ |
| ☐ Congregation Or Ami\$ | ☐ Temple Sinai | |
| ☐ The Gan School\$ | ☐ Torah Academy of Bucks County | |
| ☐ Har Zion Temple\$ | ☐ Yeshiva Ketana | \$ |
| ACKNOWLEDGEMENT/RECOGNITION – Please check ALL that apply- contribution as a federal deduction, US Treasury/IRS regulations now usiness expense. As such, we recommend you select #3 or #4 as you The Individual School and the Foundation for Jewish Day Sch #1 Not recognize my gift other than in documents required by lav #2 Know my company/personal name for administrative purpose #3 Know my company/personal name, and may recognize my gift #4 Recognize my company/personal name beyond the school con newspapers, publications, advertisements, etc.) AND #5 I would like the Jewish Federation of Greater Philadelphia to b process is in development) IMPORTANT - I would like my donation to be recognized using the form | stipulate that it must be deemed an ordinar acknowledgement/recognition option. cools may v. (anonymous) s only, but not publicly recognize my gift. within the school community only. nmunity, by FJDS, and include in public not e made aware that I participate in the EITC | ary and necessary ifications (e.g. |

Print Name (Required)

Date