

PAYMENT INSTRUCTIONS: Wire transfer of your EITC/SO contribution is preferred and should be directed as follows: **Bank Name - Firsttrust 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 **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 26-27 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(S) AND SPECIFY AMOUNT PER SCHOOL**

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

FJDS will make reasonable efforts to honor this request, and an explanation will be provided if changes are required

■ **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 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) _____

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