

1.

Check with your employer to see if this is a benefit that they are willing to provide.

2.

Fill out both sides of this form, and send it to **School Choice Arizona** by mail, email, or fax.

3.

School Choice Arizona will send you a confirmation of this pledge, and a form to give to your employer.

Donor/Employee Information

Last Name: _____ First Name(s): _____ MI(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ - _____ Email: _____

I am claiming this tax credit on my 20____ state taxes.

Have you already donated to a School Tuition Organization for the claim year above?

Yes, it was to _____ (STO)
for \$_____.

No, this is my first time donating to an STO for this claim year.

Employer Information

Employer Name: _____

Primary Contact Name: _____

Employer Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ - _____

NOTICE: A school tuition organization cannot award, restrict, or reserve scholarships solely on the basis of a donor's recommendation. A taxpayer may not claim a tax credit if the taxpayer agrees to swap donations with another taxpayer to benefit either taxpayer's own dependent. A.R.S. 43-1603 (C). Any designation of your own dependent as a potential recipient is prohibited.

Donation Information

YOU ANTICIPATE
FILING YOUR TAXES AS:

A Single Taxpayer

Married Persons Filing Jointly

Tax year of withholding donations: _____

I intend to apply all withholding donations from

_____ to _____ for the tax year listed above.
(Month) (Month)

Any donations made between
JANUARY 1st and **TAX DAY**
may be applied to the
current or previous tax year!

Recommended Student Name(s): _____
(Optional)

School Name: _____
(Optional)

Total Pledge \$ _____

If your total pledge is greater than \$1245/\$623 dollars (Married Filing Jointly/Single), a part of your donation will be claimed as the Overflow Tax Credit. You may make a separate recommendation for this portion of your donation below:

Recommended Student Name(s): _____
(Optional)

School Name: _____
(Optional)

2022 TAX CREDIT MAXIMUMS

Single Taxpayers

Married Filing Jointly

ORIGINAL
TAX CREDIT **\$623**

ORIGINAL
TAX CREDIT **\$1245**

OVERFLOW
TAX CREDIT **\$620**

OVERFLOW
TAX CREDIT **\$1238**

COMBINED TOTAL **\$1243**

COMBINED TOTAL **\$2483**

**YOU MAY DONATE UP TO THESE AMOUNTS OR YOUR
ACTUAL STATE TAX LIABILITY, WHICHEVER IS LESS**

Confirmation

Send me confirmation via: Email Mail Fax (____) ____ - _____

Notes: _____

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