



REVENUE DIVISION
Tax Credits/Special Refunds
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 Little Rock, Arkansas 72203-8054
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Philanthropic Investment in Arkansas Kids Program Tax Credit Application and Receipt of Eligible Contribution

1. Scholarship Granting Organization

Name of Organization	FEIN
Address	Telephone
Name and Title of SGO Official Completing Form	

2. Donor

Type of Entity: <input type="checkbox"/> Individual <input type="checkbox"/> LLC* <input type="checkbox"/> Partnership* <input type="checkbox"/> Corporation	
*If entity is Partnership or LLC, please provide a separate attachment that includes name of members, SSN/FEIN, and ownership percentage.	
Name	FEIN/SSN
Address	Telephone

3. Eligible Contribution Information

Eligible Contribution Amount	Consent to Release Tax Credit Information to SGO - Donor authorizes the Department of Finance and Administration (DFA) to notify the Scholarship Granting Organization (SGO) of the amount of tax credit that is certified and granted to Donor (Donor's initial required in box below). <input type="checkbox"/> YES <input type="checkbox"/> NO
Eligible Contribution Date	
Method of Contribution (Cash, Check, EFT)	

4. Signatures of SGO Official and Donor

The persons signing below affirm that the information contained within this application is true and accurate and the eligible contribution above was made by the Donor and actually received by the SGO. In order for this application to be considered for a tax credit, the SGO must provide a copy of this completed and signed application to the Tax Credits/Special Refunds Section of the Department of Finance and Administration electronically at the following e-mail address: PIAKP.TaxCredit@dfa.arkansas.gov.

 Signature of SGO Official Date

 Signature of Donor Date