

**Pennsylvania DCED Single Application for
Educational Improvement Tax Credit (EITC)
and
Opportunity Scholarship Tax Credit (OSTC)**

1. Have you registered on the DCED website, <https://dced.pa.gov/>
 Yes
What is your user name? _____ What is your password? _____
 No, please register me with a username and password.
2. Are you applying as:
 For Profit Non Profit Government Other
3. Company Entity Type:
 Limited Liability Partnership Sole Proprietorship S Corporation
 Partnership Limited Liability Corporation C Corporation
4. Federal Employer Identification Number (FEIN) or SSN: _____
5. NAICS* Code _____ (or type of business if you do not know code)
6. Company Entity Name:

7. Business Address: _____
8. CEO: _____ CEO Title: _____
9. Application Contact Name: _____ Title: _____

- Phone: _____ Email: _____
10. Are you applying for: EITC (Choose SO) OSTC
 Both (if EITC, SO Year 1 or 2)
10a. EITC amount to be donated per year to AIM Academy \$ _____
10b. OSTC amount to be donated per year to AIM Academy \$ _____
11. Enterprise type: _____
12. Business Tax Year End _____ (mm/dd)
13. Location: Choose "Statewide Program" from first dropdown, (or fill in County: _____ and Municipality: _____ and Elected Officials: _____ (Statewide is easiest to choose)
14. PA corporate Tax Account ID Number: _____
(If your company does not have one write "0000-000")
15. This application is for the following commitment
 Year 1 of a 1 Year Commitment (75% Tax Credit)
 Year 1 of a 2 Year Commitment (90% Tax Credit)
 Year 2 of a 2 Year Commitment (90% Tax Credit)

I hereby certify that all information contained herein is true and correct to the best of my knowledge. I acknowledge that tax credits will be awarded only for approved contributions made to Scholarship Organizations listed by the Department (DCED) at <https://dced.pa.gov/>. I am aware that contributions must be made within 60 days of the date on the approval letter and receipts must be forwarded to DCED by the business within 90 days of approval. Furthermore, I acknowledge that if I knowingly make a false statement to obtain tax credits, I (company, entity and signer) may be subject to criminal prosecution. I am authorizing my completion of this application to the PA DCED by a third party.

Signature: _____

Date: _____

Print Name: _____

Title: _____

* A NAICS Code search can be done at www.NAICS.com or by using the pull down menus on the screen. MODIFIED FOR SO Yr 1 or 2