

## SUPPORT EDUCATION. DONATE TODAY!

## **Donor Information**

Business Name:			
Name:	Spouse Name: _	_ Spouse Name:	
Phone:	_ Spouse Phone:		
Email*:	Spouse Email:		
Address:			
City:	State:	Zip Code:	
Primary Donor SSN/EIN*:  *The Oklahoma Tax Commission requires us to provide your tax credits for donating to OSF. OSF also requires do		/Employer Identification Number for you to claim	
Donor Filing Status			
Single/Married filing separately	Married filing jo	intlyQualified business entity	
Donor Commitment			
One Year (up to a 50% tax credit)1/	We are fulfilling the s	second year of our two-year commitment	
Two Year (up to a 75% tax credit)1/	We are starting a new	w two-year commitment in 2023	
If I agree to make a two-year commitment, I agree to (i.e., 2023 and 2024). In return, I will receive an Oklah			
Donor Designation  Donation Amount: \$	SCAN TO	DONATE	
Maximize your tax credit with a two-year cor \$2,667 when filing jointly or \$133,333 when			
KIDS IN CRISIS: Please apply my generou assistance to immediately switch learning en	_		
X Designate the school(s) to benefit from y	your gift. See osfkids.c	org for a list of participating schools.	
CROSSINGS CHRISTIAN SCHO	0L		
Donor Signature:			

Complete this form and make the initial donation <u>check payable to the Opportunity Scholarship Fund</u>.

Please, mail to OSF Attn: Gift Processing, 7633 East 63rd Place, Ste. 353, Tulsa, OK 74133

All donations must be **POSTMARKED** on or before **December 31**.

OSF must report gifts to the **Oklahoma Tax Commission on January 10**, of the following year, to be credited in the year donated.