



ARIZONA DEPARTMENT OF REVENUE
Application for Approval of the
Corporate Income Tax Credit for Donations to School Tuition Organizations
(A.R.S. § 43-1183 or A.R.S. § 20-224.06) or
Corporate Income Tax Credit for Disabled / Displaced Students
(A.R.S. § 43-1184 or A.R.S. § 20-224.07)

- **Program Guidelines available at www.azdor.gov:**
Click on the "Tax Credits" link on left side of home page.
- **Send the completed form via email to:**
DOROERA@azdor.gov
- **Questions regarding the program can be directed to:**
Karen Jacobs.....(602) 716-6923

• **Attention:**
Failure to complete the form will result in a delay in the processing of the request, resulting in an extension of the twenty-day approval period and possibly being moved down in the line for credit requests.

- This donation is for the corporate tuition organization credits (A.R.S. § 43-1183 or A.R.S. § 20-224.06).
- This donation is for the corporate disabled/displaced students credit (A.R.S. § 43-1184 or A.R.S. § 20-224.07).

STO requesting pre-approval:		
STO street address:		
City:	State:	ZIP Code:
STO contact person:	Phone Number (with area code)	
E-mail address:		

Corporation requesting to donate:		
Corporate street address:		
City:	State:	ZIP Code:
Corporate EIN:	<input type="checkbox"/> Check box if this donation is from an S corporation pursuant to A.R.S. § 43-1089.04.	
Name and EIN of parent S corporation if contributing company is a qualified subchapter S subsidiary:		
<input type="checkbox"/> Check box if this corporation pays insurance premium tax	NAIC Number:	
Identify and enter corporate tax year of the donation: <input type="checkbox"/> calendar year (Y,Y,Y,Y) <input type="checkbox"/> or fiscal year (M,M,D,D Y,Y,Y,Y) and ending (M,M,D,D Y,Y,Y,Y)		
Amount the corporation is requesting to donate: \$		

Approval or denial of this application will be emailed to the STO.