



QCUSD PUBLIC SCHOOLS PAYROLL TAX CREDIT DEDUCTION

Aiding Students' Success through Your State Tax Return

Your contribution will be of great assistance to the children of our District and is very much appreciated. You will receive an email receipt via Touchbase each pay period that will be your official receipt. The District will not provide a total year-end receipt.

Arizona Revised Statutes § 43-1089.01 allows donors to receive a tax credit for their donation. **The credit allowed on joint tax returns may not exceed \$400 or \$200 on individual tax returns.** Recreational, amusement, and tourist field trips are not eligible. Please get in touch with your tax advisor to determine the application of the credit. **There are NO REFUNDS, and they are NOT transferable.**

Total Contribution for the Fiscal year 21/22 \$ _____. The District does not keep track of individual tax credit balances. The amount you are designating will be for the 21/22 school year, not the calendar year and, evenly deducted amongst your eligible paychecks for the remainder of the 21/22 school year.

Identification of the school(s) you want your contribution to benefit:

Please indicate your choice by way of a percentage. Example: If you wish to allocate all of your donations to Queen Creek High School, please indicate 100%. If you want half of your contribution to go to Queen Creek Elementary and a half to go to Queen Creek Junior High, show 50% for each school.

- | | |
|--|---------------------------------|
| _____ Desert Mountain Elementary | _____ Schnepf Elementary |
| _____ Faith Mather Sossaman Elementary | _____ Silver Valley Elementary |
| _____ Frances Brandon-Pickett Elementary | _____ Newell Barney Junior High |
| _____ Gateway Polytechnic Academy | _____ Queen Creek Junior High |
| _____ Jack Barnes Elementary | _____ Eastmark High School |
| _____ Katherine Mecham Barney Elementary | _____ Queen Creek High School |
| _____ Queen Creek Elementary | |

Specific program within a school:

- _____ Athletics (not available for Elem) _____ Fine Arts _____ Principal's Choice
 _____ Other

Employee Name: _____ Date: _____
 Students Name: _____ Activity: _____
 Employee Signature: _____

THIS FORM EXPIRES ON JUNE 30, 2022. PLEASE COMPLETE THE FORM ANNUALLY AND RETURN IT TO THE PAYROLL MANAGER.

Employer Use Only

Date Received: _____ Processed By: _____

Total Contribution \$ _____ Pay Periods: _____ Amount per pay period \$ _____