

QCUSD PUBLIC SCHOOLS PAYROLL TAX CREDIT DEDUCTION

Aiding Students' Success through the Individual 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. A grand total receipt at the end of the year will not be provided. Please keep track of your individual receipts.

This contribution is eligible for the Arizona state income tax credit as allowed by Arizona Revised Statutes § 43-1089.01. This process allows donors to receive a credit towards Arizona state taxes due. **Joint tax returns may not exceed \$400 tax credit. Individual tax returns may not exceed \$200 tax credit.** Recreational, amusement, and tourist field trips are not eligible. Please contact 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 19/20 \$_____. The District does not keep track of individual's tax credit balances. The amount you are designating will be for the 19/20 school year not calendar year. This amount is evenly deducted amongst your eligible paychecks for the remainder 19/20 school year.

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

Please indicate your choice by way of a percentage. Example: If you want all of your contribution to go to the Queen Creek High School, indicate 100%. If you want half of your contribution to go to Queen Creek Elementary and half to go to Queen Creek Middle School, indicate 50% for each respective school.

| | |
|--|-----------------------------------|
| _____ Queen Creek Elementary | _____ Silver Valley Elementary |
| _____ Desert Mountain Elementary | _____ Queen Creek Middle School |
| _____ Jack Barnes Elementary | _____ Newell Barney Middle School |
| _____ Frances Brandon-Pickett Elementary | _____ Queen Creek High School |
| _____ Gateway Polytechnic Academy | _____ Eastmark High School |
| _____ Faith Mather Sossaman 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 JUNE 30, 2020. PLEASE TURN FORM INTO PAYROLL

Employer Use Only

Date Received: _____ Processed By: _____

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