



Oregon IDA Tax Credit Donor Form 2021

Date: _____

Individual Taxpayer OR Business name as it appears on your tax return: _____

Corresponding SSN **OR** FEIN*: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone (please circle - home/cell/work): _____ Email: _____

*For couples filing joint returns, submit **one** taxpayer name and the corresponding Social Security Number.
For married couples filing separate returns and donating separately, submit **separate** donor forms.*

CPA, Financial Advisor and/or Broker (Optional)

Name: _____ Firm: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Contribution Method (All Methods at 90% Tax Credit Rate)

Credit Card

Amount: \$ _____ To make a donation, visit www.oregonidainitiative.org/donateida/

Check

Amount: \$ _____ To make a donation, visit www.oregonidainitiative.org/donateida/

Wire Transfer

Amount: \$ _____ *Make check payable and mail to Oregon IDA Initiative*

Stock/Mutual Fund Transfer

Symbol(s): _____ Number of Shares: _____

Along with your donation, submit this form to us via mail to the address below or using our [secure document transfer](#)

All checks mailed must be postmarked by no later than 12.31.20 and all credit card, stock/mutual fund, and wire transfer donations must be received by 12.31.20 and before available tax credits are sold for the year.

Questions? Contact Monica Fletcher at 503.226.3001 x102 or mfletcher@neighborhoodpartnerships.org.

Note: The Oregon Department of Revenue **requires** that all tax credit contributions include a SSN or FEIN. Your personal ID is secure and will only be shared with the Department of Revenue.