



Date:				
Individual Taxpayer OR Business name as it appears of	on your tax ret	urn:		
Corresponding SSN <u>OR</u> FEIN*:				
Note: The Oregon Department of Revenue <u>requires</u> that all tax cr ID is secure and will only be shared with the Department of Reven		s include a S	SSN or FEIN. Y	our personal
Mailing Address:	City: _		State:	_ Zip:
Phone:		home	Cell	o work
Email:				
Select at least one (if you make no selection, you will only receive a physical letter):				
Electronic acknowledgement letter (via email) Physical acknowledgement letter (via mail)				
*For couples filing joint returns, submit <u>one</u> taxpayer name and the corresponding Social Security Number. For married couples filing separate returns and donating separately, submit <u>separate</u> 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 <u>www.oregonidainitiative.org/donateida/</u>				
☐ Check Amount: \$ Make check payable and mail to Oregon IDA Initiative				
☐ Wire Transfer Amount: \$ To make a donation, visit www.oregonidainitiative.org/donateida/				
Stock/Mutual Fund Transfer Symbol(s): Number of Shares:				
In some cases, stock transfers can take several weeks to complete. We advise donors to plan accordingly.				

Submit this form to us along with your donation via mail to the address below or using our <u>secure document</u> <u>transfer.</u>

All checks mailed must be postmarked by no later than 12.31.21 and all credit card, stock/mutual fund, and wire transfer donations must be received by 12.31.21 and before available tax credits are sold for the year.

Questions? Contact Adam Lewis at 541-207-8802 or IDATaxCredit@neighborhoodpartnerships.org.