



# Florida Tax Credit Scholarship Program

## Application for Tax Credit Allocation for Contributions to Nonprofit Scholarship-Funding Organizations

DR-116000  
R. 05/22  
Rule 12-29.003, F.A.C.  
Effective 05/22  
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Business Name:		Federal Employer Identification Number (FEIN):	
Business Address:			
City:		State:	ZIP:
Contact Person Name:	Telephone Number:	Email Address:	

Enter the nonprofit scholarship-funding organization (SFO) to which the contribution will be made. A separate application is required for each organization: \_\_\_\_\_

Total amount of planned contribution: \$ \_\_\_\_\_

Indicate the amount of credit allocation for each applicable tax. The sum of the amounts must equal the planned contribution amount entered above.

\$ \_\_\_\_\_ Corporate Income Tax  
                                     Beginning Date of Tax Year: \_\_\_\_\_                                      Ending Date of Tax Year: \_\_\_\_\_

\$ \_\_\_\_\_ Insurance Premium Tax  
                                     Prior Calendar Year: \_\_\_\_\_                                      or                                      Current Calendar Year: \_\_\_\_\_

\$ \_\_\_\_\_ Excise Tax on Malt Beverages  
                                     For the Fiscal Year beginning July 1, \_\_\_\_\_  
                                     Malt Beverage License Number: \_\_\_\_\_

\$ \_\_\_\_\_ Excise Tax on Wine Beverages  
                                     For the Fiscal Year beginning July 1, \_\_\_\_\_  
                                     Wine Beverage License Number: \_\_\_\_\_

\$ \_\_\_\_\_ Excise Tax on Liquor Beverages  
                                     For the Fiscal Year beginning July 1, \_\_\_\_\_  
                                     Liquor Beverage License Number: \_\_\_\_\_

\$ \_\_\_\_\_ Sales and Use Tax due from a Direct Pay Permit Holder  
                                     For the Fiscal Year beginning July 1, \_\_\_\_\_  
                                     Sales Tax Certificate Number: \_\_\_\_\_

\$ \_\_\_\_\_ Tax on Oil Production  
                                     For the Fiscal Year beginning July 1, \_\_\_\_\_

\$ \_\_\_\_\_ Tax on Gas Production  
                                     For the Fiscal Year beginning July 1, \_\_\_\_\_

If you file a consolidated Florida corporate income tax return, you must provide the parent corporation's name and FEIN.

Parent corporation \_\_\_\_\_

Parent corporation's FEIN   -

I understand that section (s.) 1002.395(5)(b)2., Florida Statutes (F.S.), requires the Florida Department of Revenue to provide a copy of any approval or denial it issues with respect to this application to the nonprofit scholarship-funding organization indicated in this application.

Under penalty of perjury, I declare that I have read this application and that the facts stated in it are true.

\_\_\_\_\_  
Signature of officer, owner, or partner

\_\_\_\_\_  
Date