

Indiana Housing and Community Development Authority Donor Contribution Form

Contributor Information (To be completed by the contributor and the qualified Neighborhood Assistance Organization)

Name of contributor		Social Security or Federal Identification Number				
Address			Telephone number			
City	State	Zip Code	Contributor's tax year ending			

Credit Computation (Contributor must sign below, provide proof of payment and/or a statement of the value of any materials donated)								
Date of contribution Agreement Number								
1.	1. Total Amount of contribution. <i>Describe type:</i>			\$				
2.	2. Multiply line 1 by 50% (x .50)			\$				
3.	3. Tentative amount of credit: lessor of line 2 or \$25,000* or organization's remaining available credits			\$				
4.	4. NAP Eligible Contribution to be reported to IHCDA and IDOR: multiply line 3 by 200%, (x 2)			\$				
* Contributors may only claim \$25,000 in total NAP Tax Credits in any one calendar year, even if they contribute to multiple								

* Contributors may only claim \$25,000 in total NAP Tax Credits in any one calendar year, even if they contribute to multiple organizations. If contributor donates to multiple organizations and their total donations are more than \$50,000, the above credit on line 3 may not be honored. It is the responsibility of the contributor to track their donations and their total expected tax credits; the Neighborhood Assistance Organization is only responsible for tracking the credits for the donations it receives directly.

Signature of contributor **>**

Approved Neighborhood Assistance Organization							
Name of Organization	Signature of Authorized Official						
Address	City		State	Zip Code			
If a contributor's expected credit is denied by IDOR, the and contact information were correctly reported; an in everything appears to have been correctly reported, the assistance.	correct SSN is the mos	st common mistake	e that causes	a denied credit. If			