

Indiana Housing and Community Development Authority

Donor Contribution Form

Name of contributor Social Security or Fede				al Iden	tificat	tion Number	
			,				
Address			Telephone number				
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City State Zip Code Cor			Contributor's tax vear en	Contributor's tax year ending			
English Country of the York Country of the Yor							
(Cantuibtan maat ai ma.b.		Credit Compu				,; ala alamata al\	
Date of contribution	elow, provide pro	of of payment and/or a	Agreement Number	any r	nate	rials donated)	
Page of contribution							
1. Total Amount of contribution. Describe type:					\$		
2. Multiply line 1 by 50% (x .50)				2.	\$		
3. Tentative amount of credit: lesser 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 \$3 organizations. If contributor don							
3 may not be honored. It is the i	esponsibility of the	e contributor to track the	eir donations and their total	exped	cted t	tax credits; the	
Neighborhood Assistance Orga	nization is only res	sponsible for tracking th	e credits for the donations it	recei	ves	directly.	
Signature of contributor ►							
Signature of contributor P							
	Approved	Neighborhood Ass	istance Organization				
Name of Organization Signature of Authorization				Officia			
			2				
Address		City	State			Zip Code	
f a contributor's expected credit and contact information were co							
verything appears to have beer ssistance.							