



Indiana Housing and Community
Development Authority
Donor Contribution Form

(File with the recipient organization participating in the IDA Tax Credit Program)

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 all services and materials donated)			
Date of contribution	Program Number 2017-NP-		
1. Amount of contribution. <i>Indicate type:</i> <input type="checkbox"/> Cash <input type="checkbox"/> Service <input type="checkbox"/> Property	1.	\$	
2. Multiply line 1 by 50% (x .50)	2.	\$	
3. Tentative amount of credit (lessor of line 2 or \$25,000)	3.	\$	
Signature of contributor ►			

Recipient Organization Information			
Name of organization	Signature of Authorized Recipients		
Address	City	State	Zip Code