



Indiana Housing & Community Development Authority

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**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
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1. Total Amount of contribution. <i>Describe type:</i> _____	1.	\$	
2. Multiply line 1 by 50% (x .50)	2.	\$	
3. Tentative amount of credit: <b>lessor</b> of line 2 <b>or</b> \$25,000* <b>or</b> organization's remaining available credits	3.	\$	
4. <i>NAP Eligible Contribution to be reported to IHCD and IDOR: multiply line 3 by 200%, (x 2)</i>	4.	\$	

\* 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 contributor should first contact the organization above, to ensure their donation and contact information were correctly reported; an incorrect SSN is the most common mistake that causes a denied credit. If everything appears to have been correctly reported, the contributor should contact IHCD at [nap@ihcda.in.gov](mailto:nap@ihcda.in.gov) to ask for further assistance.