

2008 ENDOW IOWA TAX CREDIT APPLICATION

ELIGIBILITY REQUIREMENTS

To be eligible for an Endow Iowa Tax Credit, a gift must be:

1. Made to an Endow Iowa Qualified Community Foundation, or to a Community Affiliate Organization that is affiliated with an Endow Iowa Qualified Foundation;
2. Placed in a permanent Endowment Fund of the qualifying organization. Such funds are intended to exist in perpetuity, and the spend rate from the fund may not exceed 5 % annually;
3. Placed in a permanent Endowment Fund that is for the benefit of a charitable cause or causes in the State of Iowa.

SECTION 1 (to be completed by the donor)	SECTION 2 (certification by the Community Foundation that administers the permanent Endowment Fund)
<p>Donor 1 Name:</p> <p>Donor 2 Name:</p> <p>Donor 1 SS#:</p> <p>Donor 2 SS#:</p> <p>Company Name:</p> <p>Company FEIN:</p> <p>Address:</p> <p>City, State, Zip Code :</p> <p>Telephone: ()</p> <p>Email: (optional)</p> <p><i>I hereby certify that the facts and figures presented in this application are true and correct.</i></p> <p>_____</p> <p><i>Signature of individual making the charitable gift donation</i></p> <p>_____</p> <p><i>Date</i></p>	<p>Organization:</p> <p>Contact Person:</p> <p>Organization Address:</p> <p>City, State, Zip Code:</p> <p>Telephone: ()</p> <p>Email: (optional)</p> <p><i>I hereby certify that the organization described in this section is an Endow Iowa Qualified Community Foundation, and that the facts and figures presented in this application are true and correct.</i></p> <p>_____</p> <p><i>Signature of President/Executive Director</i></p> <p>_____</p> <p><i>Date</i></p>

Amount of the charitable gift: \$ _____

Date the charitable gift was made: _____

Date the gift was placed in a permanent Endowment Fund: _____

Name of the permanent Endowment Fund in which the gift was placed:

(attach a copy of the fund agreement with this application, or a board resolution/affidavit certifying compliance with applicable Endow Iowa requirements)

The purpose of the permanent Endowment Fund is to benefit a charitable cause or causes in the State of Iowa? Yes
No

Annual spend rate of the permanent Endowment Fund meets the legal requirements of 5% or less? Yes No

If this gift was made to a Community Affiliate Organization, please provide the name of that community affiliate:

Completed Applications (along with a copy of the fund agreement or board resolution/affidavit) **should be mailed to:**
Iowa Department of Economic Development
Endow Iowa Tax Credit Program
Attn: Mr. Mike Miller
200 East Grand Avenue
Des Moines, Iowa 50309-1819
Phone: (515) 242-4807 Fax: (515) 242-4809
Email: endowiowa@iowalifechanging.com