

# 2026 Individual Development Account (IDA) Application Webinar

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Application is now open and the submission deadline is Friday,  
May 1, 2026.

[2026 IDA & IDA Tax Credit Administrator Application](#)

# AGENDA

- IDA Program Summary
- IDA Tax Credit Summary
- Application Overview
- Award Process
- Application Overview
- Questions

Additional resources can be found on the IDA partner website:

<https://www.in.gov/ihcda/program-partners/individual-development-accounts-ida/>

# IDA PROGRAM SUMMARY

- The Individual Development Accounts (IDA) Program helps low-income families achieve a greater level of self-sufficiency and economic stability through **education**, **matched saving incentives**, and the **purchase of assets**.
- The IDA and IDA Tax Credit Application is for grant funding of qualified non-profit community development corporations and community-based organizations seeking to locally administer the IDA program to participants.

# IDA PROGRAM SUMMARY

## For IDA, assets are defined as:

- Purchasing a Motor Vehicle for Transportation to Education/Job Training or Employment
- Owner-Occupied Home Repair for a Residence in Indiana
- Starting, Purchasing, or Expanding a Small Business
- Purchasing a Primary Residence in Indiana
- Education or Job Training Expenses

# IDA PROGRAM SUMMARY

How does the program work?

- A household must be at or below 200% of the federal poverty level.
- No household members may have previously participated in IDA (even if they did not successfully complete the program).
- Primary participant must have earned income and demonstrate the ability to save at least their savings goal each month/quarter.

# IDA PROGRAM SUMMARY

How does the program work?

- Each participant receives financial literacy and asset goal specific education training as well as one-on-one case management.
- The participant is matched at a rate of \$3 for every \$1 saved, up to \$1,500 in savings (\$4,500 in match) for a total of up to \$6,000 to spend toward one *or more* qualified asset purchases.

# IDA ADMINISTRATOR RESPONSIBILITIES

- Program outreach for new applicants to fill all awarded accounts
- Accept, review, and approve participant applications
- Provide case management to participants:
  - Provide financial literacy education and asset-specific training to participants
  - Guide participants through:
    - Account opening
    - Savings process
    - Coaching/overcoming barriers
    - Asset purchase
    - Successful program completion and account closeout

# IDA TAX CREDIT SUMMARY

Program administration works largely the same way as the regular IDA program, except:

- Instead of receiving direct funding through claim submissions to IHCD, organizations are awarded Indiana tax credits, which are leveraged to donors in exchange for contributions to fund IDA accounts.
- Tax credits are worth 50% of donations (for example, \$2,000 in awarded tax credits equals \$4,000 in donations).
- Donors claim credits on their Indiana state tax returns to offset tax liability.

# IDA TAX CREDIT SUMMARY

Program administration works largely the same way as the regular IDA program, except:

- Donation information is tracked and sent to IHCDCA twice a year. IHCDCA sends donation information to the Indiana Department of Revenue (DOR) each January, so donors' credits are logged in time for tax season.
- The amount of a qualified contribution made in a taxable year by a business firm or person may not be less than one hundred dollars (\$100) and not more than fifty thousand dollars (\$50,000).

# IDA TAX CREDIT ELIGIBLE DONORS AND DONATIONS

## Eligible Donors

- Organizations or Corporations
- Families or Couples
- Donor advised funds (in some cases)
  
- *NOT eligible*: charitable organizations or foundations

## Eligible Donation Types

- Cash/Check or Credit Card
- Stock (which has been liquidated)
- Contributions designated through United Way
- Distributions from IRA/401K
  
- *NOT eligible*: in-kind or property donations, any fees associated with donations

# TRADITIONAL IDA AND IDA TAX CREDIT ACCOUNT BREAKDOWN COMPARISON

## Traditional IDA Accounts

- Total of \$5,250 per account\*:
  - \$4,500 participant match funds
  - \$500 general admin funds\*
  - \$150 asset purchase incentive admin funds\*
  - \$100 graduation incentive admin funds\*

## IDA Tax Credit Accounts

- Total of up to \$5,625 per account (under \$100,000):
  - \$4,500 participant match funds
  - \$1,125 admin funds
- Awarded tax credit amount per account is 50% of total funds needed for account (\$2,812.50).

# BENEFITS OF IDA TAX CREDITS

- Allows for expansion of the program:
  - Tax credits allow for up to \$400,000 annually to be used toward additional IDA accounts (which translates to 71 accounts, if all funds are used).
- Greater flexibility in program administration:
  - No waiting for claims deposits
  - Higher administrative amounts\*
  - Greater autonomy

*\*Each organization may use up to twenty percent (20%) of the first one-hundred thousand dollars (\$100,000) deposited each calendar year in the fund to help pay for the organization's expenses related to the administration of accounts. All deposits over one-hundred thousand dollars (\$100,000) during each calendar year may be used **only** to fund accounts.*

# APPLYING FOR IDA TAX CREDIT ACCOUNTS

- Both the traditional IDA and IDA Tax Credit programs are applied for on the same application, but different award agreements are sent. Organizations can apply for traditional IDA accounts, IDA Tax Credit accounts, or both.
- Consider applying for IDA Tax Credits if:
  - You may be looking to expand your IDA program
  - You have donors interested in these tax credits or you have been successful in participating in NAP (or other donor funded programs).
- If you think this might be a good fit, consider applying for 1-2 tax credit accts.
- IDA tax credit program will have built in sales benchmarks\*.
  - **First Half:** 50% of credit sales due by Dec 31<sup>st</sup> – *If not met, remaining credits may be deallocated.*
  - **Second Half:** 100% of credit sales due by June 30<sup>th</sup> – *If not met, credit eligibility for the next year may be reduced.*

\*Not meeting benchmarks will NOT automatically disqualify you from applying for an IDA award. However, multiple years of not meeting benchmarks could affect your eligibility for future awards.

# APPLICATION OVERVIEW

# APPLICATION: ORGANIZATION INFO

## Section 2 - Organization Eligibility:

Confirmation of Non-Profit Domestic Corporation in Indiana in good standing with Indiana Secretary of State

Organization Name & dba

To be eligible for IDA funding, your organization must have filed as a Domestic Nonprofit Corporation in the State of Indiana and be in good standing with the Indiana Secretary of State.

Is your organization currently registered as a Domestic Nonprofit Corporation in the State of Indiana AND in good standing with the Indiana Secretary of State? (<https://bsd.sos.in.gov/publicbusinesssearch>)? \*

*(If you select "No" to this answer, unfortunately your agency does NOT qualify to administer the IDA program.)*

Yes

No

Organization Legal Name (this should exactly match what is listed on the Indiana Secretary of State INBiz website, including punctuation, and must be "Active"): \*

<https://bsd.sos.in.gov/publicbusinesssearch>

Enter your answer

If your organization uses a registered dba/assumed name that you would like to include, list it here (must be registered with the Indiana Secretary of State INBiz website):

Enter your answer

# APPLICATION: ORGANIZATION INFO

## Section 3 – Non-For-Profit Status:

### Confirmation of IRS non-for-profit designation & EIN

Non-Profit Status

To qualify for IDA funding, your organization must be an eligible non-profit corporation with a 501(c)3, 501(c)4, 501(c)5, or 501(c)6 designation from the Internal Revenue Service.

Does your organization have a current 501(c)3, 501(c)4, 501(c)5, or 501(c)6 designation? \*

*(If you select "No" to this answer, unfortunately your agency does NOT qualify to administer the IDA program.)*

Yes

No

Organization EIN: \*

Enter your answer

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# APPLICATION: ORGANIZATION INFO

## Section 4 - Organization Address:

Organization Address

Addresses should be within Indiana

Street: \*

  

City: \*

  

ZIP \*

  

Organization Phone Number: \*

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# APPLICATION: ORGANIZATION INFO

## Section 5 – Authorized Signatory:

Authorized Signatory

Executive Director or Authorized Signatory (for contracts/agreements): \*

Name

Enter your answer

Title \*

Enter your answer

Email \*

Please enter an email

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# APPLICATION: ORGANIZATION INFO

## Section 6 – IDA Contacts:

IDA Contacts

IDA Primary Contact Name: \*

  
  

Title \*

  
  

Email \*

  
  

Direct Phone Number \*

# APPLICATION: ORGANIZATION INFO

## Section 7 – IDA Tax Credits:

- Would your organization like to apply for IDA Tax Credits?
- If so, who will handle the tax credits at your organization?

Is your organization applying for IDA Tax Credits? \*

Yes

No

IDA Tax Credit Primary Contact Name (if applicable): \*

Enter your answer

Title \*

Enter your answer

Direct Phone Number \*

Enter your answer

Email \*

Please enter an email

# APPLICATION: ORGANIZATION INFO

## Section 8 – IHEDA Public Website Administrator List:

Option to add information for a public contact list for the IHEDA website  
(office locations, website link, and/or contact number)

IHEDA Public Website Administrator List

For each new award, IHEDA updates its website with the current IDA and IDA Tax Credit administrator lists, which was expanded last year to include the names, primary addresses, primary phone numbers, counties served, and website links.

If you would like an additional address and/or phone number listed on the Administrator List, please add those below.

Additional Address

Additional Phone Number(s)

Organization's Website

# APPLICATION: ORGANIZATION INFO

## Section 9 – Account Requests:

- New agency are limited to 5 or fewer accounts.
- Returning agencies may ask for more accounts, but they must provide a detailed explanation for how they will fill these additional accounts.
- How many IDA Tax Credit accounts are you requesting?
- Describe your experience, or performance, selling IDA Tax Credit.
- If new to IDA Tax Credits, describe similar fundraising, as well as your plan to raise sufficient contributions to fund requested IDA accounts.

How many standard IDA accounts is your organization requesting \*

Prior administrators of IDA: If you are requesting significantly more IDA accounts than your organization opened last year, please describe your new circumstances or plan to ensure you are able to fill these additional accounts.

Based on your response, if IHCD does not approve your organization's request for an increased number of awarded accounts, your requested accounts maybe reduced to either the number of accounts you opened last year or five (5) total accounts.

Enter your answer

How many IDA Tax Credits accounts are you requesting? When determining how many accounts to request, please consider your organization's ability to raise required funds and to fill IDA participant accounts.

Keep in mind that for each account you are awarded, you will receive \$2,812.50 in tax credits, which you will leverage to your donors to help you raise the \$5,625.00 in contributions needed to fund that one IDA account.

Enter your answer

If your organization has previously participated in the IDA Tax Credit Program, describe your performance in selling your awarded tax credits, including the following information:

- a) Have you have consistently been successful in fundraising/selling most, or all, awarded credits?
- b) If you have not been successful, please describe any past barriers, as well as your plan to ensure future success.

Enter your answer

If your organization HAS NOT previously participated in the IDA Tax Credit Program, describe any relevant fund raising experience, as well as your plan to successfully sell all awarded tax credits.

Enter your answer

# APPLICATION: ORGANIZATION INFO

## Section 10 – Counties Served:

### Service Area

- Counties served
- Any underserved areas or counties you're willing to serve?
- How will you service counties without an office?

Counties Served

List all counties in which your organization markets/will market IDA services. \*

Enter your answer

List any additional counties your organization is willing to serve, but may not market IDA services in (counties not listed in the previous answer).

Enter your answer

If you do not have offices in all the counties you will serve, describe how you will serve participants from any of the above-listed counties in which you do not have offices.

Include how you will address distance, meetings, local providers, vendors, financial institutions, etc.

Enter your answer

# APPLICATION: ORGANIZATION INFO

## Section 11 – Program:

- Connection to Agency Mission and Programs
- Plan for Recruiting Participants to Fill All Awarded Accounts and Successfully Graduate
- Will you administer IDA in conjunction with any other program?
- Strategies your organization will use to recruit qualified participants
- IDA Tax Credits: How will your organization fundraise with potential donors?

Describe how the IDA Program aligns with, or contributes to, your organization's overall mission, programs, and current projects. \*

Enter your answer

How will your organization promote IDA and make services accessible to participants with limited English proficiency? \*

Include information about the languages you will offer, services you will provide, agencies you will contract/partner with, publications you will advertise in, names/positions of bilingual staff, etc.

Enter your answer

Will you administer IDA in conjunction with any other program you offer? If yes, please describe the other programs being used. \*

Enter your answer

Describe the methods and strategies your organization will use to recruit qualified participants and consistently fill all awarded program spots. \*

Enter your answer

If your organization is requesting IDA Tax Credits, how will your organization fundraise with potential donors? \*

Describe all methods and the expected outcome of getting donors.

Enter your answer

# APPLICATION: ORGANIZATION INFO

## Section 12 – Staffing:

- Identify the staff involved
- Staff communication and education/cross-training

How will your organization ensure you have adequate, appropriately trained staff to maintain program compliance and provide consistent, continuous program administration and client service, including in times of staff turnover? \*

For this question, examples of program aspects/responsibilities may include the following: participant enrollment, case management, education, help with asset purchases, claim submissions, bank transfers/account management, development/tax credit sales/donor relations (if IDA tax credit participant), tracking and reporting.

Enter your answer

Identify all staff involved in IDA program administration at your agency, indicating which different aspect(s) of the program each staff member will administer. If different staff members administer different aspects of the program, how will they work together and communicate to ensure accuracy and consistency? \*

Enter your answer

Are any other staff trained in these processes? What is your plan to ensure continuity of client services and other program responsibilities in the event of staffing changes? \*

Enter your answer

# APPLICATION: ORGANIZATION INFO

## Section 13 – Case Management:

- Continuity, consistency, and frequency of service
- Participant case management, follow up, and overcoming barriers
- Keeping participants on track
- Any other communication methods your organization is using that we should consider

How often will staff meet or interact with participants (including frequency and methods of meetings and supplemental contact)? \*

What services and support will you provide to help participants achieve program goals, promote self-sufficiency, address individual financial needs, and overcome barriers? \*

How will you maximize ongoing participant engagement, keep participants on track, and minimize unsuccessful account closeout? How will you determine when it is appropriate to close unsuccessful awards and reuse the account for a new participant? \*

IHCDA utilizes monthly virtual calls for all organizations, a program inbox ([IDA@ihcda.in.gov](mailto:IDA@ihcda.in.gov)), and a SharePoint site specific to each organization for communication. What other methods of communication does your organization plan to utilize, or would like to see utilized, in partnering with IHCDA?

# APPLICATION: ORGANIZATION INFO

## Section 14 – Assets:

- Which assets will you offer?
- Flexibility for Alternative Assets as Needed

Please select all eligible asset purchase goals that your organization offers IDA program participants. \*

- Education or Job Training
- Starting or Expanding a Small Business
- Purchasing a Primary Residence in Indiana
- Repairing a Primary Residence in Indiana
- Purchasing a Motor Vehicle for the Purpose of Education, Job Training, or Employment

If a participant needs to switch asset goals, or wants to use part of their IDA funds to purchase a second asset, would your organization be open to working with them on an asset type you *do not* regularly offer? \*

If Yes, how would your organization transition to that asset type and/or what steps would you take to satisfy the requirements for an asset type you do not regularly offer?

Enter your answer

# APPLICATION: ORGANIZATION INFO

## Section 15 – Training Requirements:

The IDA program must offer Financial Education and Asset-Specific Trainings.

Both types of trainings are required as a part of the IDA program, and it is the Administrator's responsibility to enforce the following:

- Both training types must be completed within the participant's first year in the program
- Both training types must be completed before the participant's first withdrawal.

### Training and Counseling Requirements

Individuals accepted into the IDA program must receive Financial Education and Asset-Specific Trainings.

Both types of trainings are required as a part of the IDA program, and it is the Administrator's responsibility to enforce the following:

1. Both training types must be completed within the participant's first year in the program
2. Both training types must be completed before the participant makes their first withdrawal.

Provide responses for each specific training/education in this section (required Financial Education and for each Asset your organization select previously).

Describe how your organization will provide the trainings/education to IDA participants, including:

- a) The name of the curriculum (if applicable) and a description of what topics it covers
- b) Which agency will provide the training (yours or another agency), and how will the training be facilitated (in-person, online, group setting, one-on-one, self-guided through videos and/or other training materials, etc.)
- c) How the training could be revised to fit the various needs and levels of prior knowledge of participants

Financial Education

\*

Enter your answer

Asset Specific Education: Home Purchase \*

Enter your answer

Asset Specific Education: Home Repair \*

Enter your answer

Asset Specific Education: Small Business \*

Enter your answer

Asset Specific Education: Education/Job Training \*

Enter your answer

Asset Specific Education: Vehicle Purchase \*

# APPLICATION: ORGANIZATION INFO

## Section 16 – Prior Awards:

- Current/Past Participation History (Regular and Tax Credit)
- Current Available Unfilled Accounts (Regular and Tax Credit)
- Performance History

Is your organization a current or prior IDA Administrator? \*

Yes

No

If so, for which IDA award(s) did you receive funding? \*

Please include the award numbers.

Enter your answer

How many awards do you currently have active? How many accounts do each of those awards have, and of those accounts, how many are assigned to program participants? \*

Enter your answer

Over the last five program years, have you had any accounts "deallocated" from any of your awards? \*

Enter your answer

If your organization is a current or prior IDA administrator (regular or tax credit program), describe your current/recent performance administering the program to participants. \*

1. Have you consistently been successful in enrolling and graduating IDA participants by the award closeout date for most or all of your recent awarded IDA accounts?  
2. If you have not been successful, please describe any past barriers as well your plan to ensure future success.  
3. If your organization HAS NOT previously administered the IDA program to participants, describe any relevant experience administering any similar programs.

Enter your answer

For IDA tax credit awards, enter your total combined balance *remaining* of match funds that have been raised from the sale of IDA tax credits across all awards, along with the total number of additional participant accounts you will be able to open with these funds.

Do NOT include administrative funds, or funds that are already allocated for any current participants' total match.  
(Example: 2023: 1 account, 2024: 2 accounts. IDA tax credit: \$9,000/2 accounts)

Enter your answer

How many total IDA participant accounts did your organization open within the past year? Include accounts from all IDA awards as well as IDA tax credit accounts. If you did not open any accounts, or did not participate in IDA last year, enter "0."

Please note that this may be checked against your organization's claims, award tracker(s), and annual reporting as appropriate, so please ensure these are up to date and accessible to IHCD staff.

Enter your answer

# APPLICATION: ORGANIZATION INFO

## Section 17 – Financial Institution (FI):

- Every IDA Administrator must have at least one banking partner that hosts IDA accounts.
- Each banking partner that hosts IDA Accounts must sign a Memorandum of Agreement (MOA)\* with IHCDCA.

*\*MOA must be signed within a month of IDA grant agreements being signed. MOAs give IHCDCA some authority to intervene with accounts now and in the future.*

A critical part of the IDA program is the establishment and management of two savings accounts for each participant: one for their savings deposits and one for the matching funds they earn. To ensure that each account is opened correctly and that all deposits and withdrawals follow program rules, it is important that an IDA administrator partners with a Financial Institution that understands the IDA program. To give IDA participants as much time as possible to save, their accounts will need to be opened as soon as possible. Because of that, IDA Administrators are required to secure a Financial Institution partner as a part of their IDA Application.

The relationship between the State of Indiana (IHCDCA) and the financial institution is governed by a written agreement. To become a participating IDA Financial Institution, each institution must complete a Memorandum of Agreement (MOA) with IHCDCA. These MOAs are signed for a four (4) year term to cover the totality of the IDA grant period entered into with each IDA Administrator.

Is your organization partnering with one Financial Institution for *both* Participant Match Funds & Administrative Claim Funds, or *separate* Financial Institutions? \*

- My organization is partnering with one Financial Institution for both Participant Match Funds & Administrative Claim Funds
- My organization is partnering with separate Financial Institutions for Participant Match Funds & Administrative Claim Funds

Financial Institution Name: *
<input type="text"/>
Financial Institution Street Address: *
<input type="text"/>
Financial Institution City: *
<input type="text"/>
Financial Institution ZIP: *
<input type="text"/>
Financial Institution Phone Number: *
<input type="text"/>
Authorized Financial Institution Staff Member to sign MOA (enter full legal name as it should appear on MOA): *
<input type="text"/>
Authorized Financial Institution Staff Member Title: *
<input type="text"/>
Authorized Financial Institution Staff Member Email Address: *
<input type="text"/>

# APPLICATION: ORGANIZATION INFO

## Section 18 – Separate FIs:

- List the participant FI & the administrative FI, if separate

Participant Match - Financial Institution Name: *	Administrative Claims - Financial Institution Name: *
<input type="text" value="Enter your answer"/>	<input type="text" value="Enter your answer"/>
Participant Match - Financial Institution Street Address: *	Administrative Claims - Financial Institution Street Address: *
<input type="text" value="Enter your answer"/>	<input type="text" value="Enter your answer"/>
Participant Match - Financial Institution City: *	Administrative Claims - Financial Institution City: *
<input type="text" value="Enter your answer"/>	<input type="text" value="Enter your answer"/>
Participant Match - Financial Institution State: *	Administrative Claims - Financial Institution State: *
<input type="text" value="Enter your answer"/>	<input type="text" value="Enter your answer"/>
Participant Match - Financial Institution ZIP: *	Administrative Claims - Financial Institution ZIP: *
<input type="text" value="Enter your answer"/>	<input type="text" value="Enter your answer"/>
	Administrative Claims - Financial Institution Phone Number: *
	<input type="text"/>

~ Both FIs must have a signatory for the bank MOA

# APPLICATION: ORGANIZATION INFO

## Certification & Acknowledgement:

- Certify that everything is correct & make sure to click “submit”
- You will receive a screen with the message, “Thank you for submitting your application for Individual Development Accounts (IDA) & IDA Tax Credits.”
- It will have an option to save you responses.

### Acknowledgement and Application Certification

I hereby certify that all information stated herein, as well as any information provided in an accompaniment herewith, is true and accurate.

I further certify that I have been authorized to submit this 2025 IDA & IDA Tax Credit Administrator Application by the organization named in this application on behalf of that organization. \*

Please type your name in the space provided to certify the above statement is true and submit your application.

Enter your answer

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Submit

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# QUESTIONS

Any questions that can't be answered right away, we will take your information and do some research so we can respond after the meeting.

# REMINDER

Application deadline is End of Business  
- Friday, May 1, 2026.

**THANK YOU FOR PARTICIPATING IN  
THIS WEBINAR.**

**If you have any unanswered questions,  
please email the IDA inbox at  
[ida@ihcda.in.gov](mailto:ida@ihcda.in.gov)**