

Contributor Information			
(To be completed by the contributor and the qualified Individual Development Account Tax Credit Administrator)			
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		Award Number	
1. Amount of contribution	1.	\$	
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	3.	\$	
4. IDA Tax Credit Eligible Contribution to be reported to IHCD and IDOR: multiply line 3 by 200% (x 2)	4.	\$	
<p>*Contributors may only claim \$25,000 in total IDA 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 IDA Tax Credit Administrator is only responsible for tracking the credits for the donations it receives directly.</p>			
Signature of Contributor ►			

Approved Individual Development Account Administrator			
Name of Organization		Signature of Authorized Recipient	
Address	City	State	Zip Code
<p>*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 organization should contact IHCD at ida@ihcda.in.gov to ask for further assistance.</p>			