

## Endow Iowa Tax Credit Application Instructions

On the following page, complete the appropriate column as indicated below, then **print, sign,**  
and **return via mail** to:

Omaha Community Foundation  
Attn: Stacey Goodman  
3555 Farnam Street, Suite 222  
Omaha, NE 68131

### **For gifts from Individuals:**

Please complete the left-hand column titled *Donor Individual(s) Information*.

### **For gifts from Corporate Entities:**

Please complete the center column titled *Donor Company Information*.

The Community Foundation staff will complete all *Donation, Fund, and Foundation Information* upon receipt of your contribution and its placement into the permanent endowment fund. Finalized applications will then be submitted into [IowaGrants.gov](http://IowaGrants.gov) by Community Foundation staff for further processing by the Iowa Economic Development Authority.

### **Questions?**

Contact Stacey Goodman ([stacey@omahafoundation.org](mailto:stacey@omahafoundation.org)) or Tess Houser ([tess@omahafoundation.org](mailto:tess@omahafoundation.org)) at 800-794-3458.

# 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.

Donor Individual(s) Information	Donor Company Information	Donation, Fund, and Foundation Information
<p><input type="checkbox"/> Dr.   <input type="checkbox"/> Mr.   <input type="checkbox"/> Mrs.   <input type="checkbox"/> Ms. Donor 1 Salutation</p> <p>Donor 1 Name</p> <p>Donor 1 Social Security Number</p> <p>Donor 1 Email Address</p> <p><input type="checkbox"/> Dr.   <input type="checkbox"/> Mr.   <input type="checkbox"/> Mrs.   <input type="checkbox"/> Ms. Donor 2 Salutation (if applicable)</p> <p>Donor 2 Name (if applicable)</p> <p>Donor 2 Social Security Number</p> <p>Donor 2 Email Address</p> <p>Address</p> <p>City, State, Zip</p> <p>Telephone Number</p> <p><b><i>I hereby certify that the facts and figures presented in this application are true and correct.</i></b></p> <p>_____ Signature of Donor 1</p> <p>_____ Signature of Donor 2 (if applicable)</p> <p>_____ Date</p>	<p>Company Name</p> <p>Company Federal ID Number</p> <p>Company Email Address</p> <p>Address</p> <p>City, State, Zip</p> <p>Telephone Number</p> <p><b><i>I hereby certify that the facts and figures presented in this application are true and correct.</i></b></p> <p>_____ Signature of Company Official</p> <p>_____ Date</p>	<p>Amount of the charitable gift: \$</p> <p>Date the gift was made:</p> <p>Date the gift was placed in a permanent Endowment Fund:</p> <p>Name of the Permanent Endowment Fund in which the gift was placed:</p> <p style="text-align: center;"><b><i>(Attach a copy of the fund agreement with this application or a board resolution/affidavit certifying compliance with applicable Endow Iowa requirements.)</i></b></p> <p><u>Omaha Community Foundation</u> Community Foundation Name</p> <p><u>Stacey Goodman</u> Community Foundation Contact</p> <p><u>3555 Farnam Street, Suite 222</u> Address</p> <p><u>Omaha, NE 68131</u> City, State, Zip</p> <p><u>402-342-3458</u> Telephone Number</p> <p><u>stacey@omahafoundation.org</u> E-mail Address</p> <p>If this gift was made to a Community Affiliate Organization, please provide the name of that Community Affiliate:</p>
<p><b><u>Community Foundation Certifications:</u></b></p> <p>I hereby certify: That the Foundation listed above is an Endow Iowa Qualified Community Foundation; that the donation listed above is being made to a Permanent Endowment Fund which meets the requirement of an annual spend rate of 5% or less, and which will be used for the benefit of a charitable cause or causes in Iowa; and, that the facts and figures presented in this application are true and correct.</p> <p>I agree to provide access to records relating to this application to the Iowa Economic Development Authority (IEDA), or IEDA's designee, at any time upon IEDA's request.</p> <p>_____ Signature of Foundation President/CEO (or designee)</p> <p>_____ Printed Name of Signer</p> <p>_____ Date</p>		
<p><b>Completed Applications should be mailed to:</b></p> <p><b>Omaha Community Foundation</b> <b>Attn: Stacey Goodman</b> <b>3555 Farnam Street, Suite 222</b> <b>Omaha, NE 68131</b></p>		
<p><b>(Finalized application should be entered into IowaGrants and the paper copy retained <u>by the Community Foundation</u>)</b></p>		