



# Gift In-Kind Form

Please refer to the Gift Acceptance Policy for Gift In-Kind donations

Development officer, please forward a completed Gift In-Kind form along with appropriate documentation to the UCF Foundation for acceptance.  
Mail to: UCF FOUNDATION, 12424 RESEARCH PARKWAY, SUITE 250, ORLANDO, FL 32826

## DONOR INFORMATION (Bold items are required)

Donor/Gift Type:  INDIVIDUAL  JOINT WITH SPOUSE  CORPORATION OR ENTITY

UCFF Apollo ID (for current donors): \_\_\_\_\_

Donor Name: \_\_\_\_\_

If joint gift, please provide both names. If corporation or entity gift, list the name of the company.

Primary Contact: \_\_\_\_\_

For corporation or entity gift only. Who should receive acknowledgment and be invited to recognition events?

Preferred E-mail Address: \_\_\_\_\_  HOME  BUSINESS

Preferred Phone Number: \_\_\_\_\_ Ext \_\_\_\_\_  HOME  BUSINESS

Preferred Address: \_\_\_\_\_  HOME  BUSINESS

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

## GIFT INFORMATION

Date received at UCF \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Valued at \$ \_\_\_\_\_

(Note: If the value of the gift is \$5,000 or more, the IRS requires an appraisal by an independent appraiser in order for the value of the gift to be eligible as a deduction. The donor should consult with their tax consultant. If an appraisal is obtained by the donor, then check here . Otherwise, the donor's gift will only be credited by the foundation.)

Donor's Conditions:  no conditions or  conditions

Describe conditions (identify any constraints): \_\_\_\_\_

Duration of conditions:  Useful Life of Gift or  Term - keep until: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Description of Gift In-Kind: \_\_\_\_\_

College, Division, Department or Unit receiving gift: \_\_\_\_\_

UCF Contact receiving gift: \_\_\_\_\_

Donor Name (print name)

Title/Relationship (if contact person)

Donor Name (signature)

Date

## FAIR MARKET VALUE CERTIFICATION:

As described by the Foundation's acknowledgment policy, the IRS only allows a donor to take a contribution deduction to the extent that the eligible contribution exceeds the fair market value of the goods or services the donor receives in return for the contribution. The Foundation will rely on completion of this section when issuing an acknowledgment.

YES  NO Goods or services were provided to the donor in exchange for this gift, other than name and logo recognition.

If yes: Description of the Goods/Services: \_\_\_\_\_

Fair Market Value Total: \$ \_\_\_\_\_ (Please attach detailed information regarding the FMV total)

YES  NO Donation represents a significant discount on the purchase of goods or services

If yes: Please provide the total valued amount for goods or services \$ \_\_\_\_\_

Please provide the amount paid for the goods or services \$ \_\_\_\_\_

The difference represents the discount received (= charitable value) \$ \_\_\_\_\_

