University of Nevada, Reno

GIFT IN KIND DOCUMENTATION FORM

DONOR CONTACT INFORMATION: DONOR'S NAME/COMPANY NAME CONTACT NAME (COMPANIES/ORGANIZATIONS ONLY) TAX ID Number (COMPANIES/ORGANIZATIONS ONLY) ADDRESS _______ CITY/STATE/ZIP PHONE NUMBER ______ FAX _____ EMAIL **LETTER FROM DONOR:** Please accept the following gift-in-kind*, ________, as a ________, as a donation to ______(College/Department/Program/Special Event – please describe) The estimated value of this gift-in-kind** is ______ . Should you have any questions regarding this donation, please contact me at the number(s) listed above. Sincerely, Sign Name Date Date Print Name Print Company Date **UNR Representative name:** Phone: *If gift certificates are given and they represent service or partial interest, a donation value will not be recorded (i.e. meal at a restaurant) but recognition will be given. If the gift certificates represent a cash redemption value then a donation value representing the face value is recorded and recognition is also given. ** If over \$5,000, attach backup materials verifying value i.e. invoice, appraisal, etc. NOTE: The Internal Revenue Service requires that all gifts over \$5,000 be claimed on Form 8283 for tax purposes. A qualified

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appraiser, not affiliated with the University, must value the gift at the donor's expense.

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