

UNIVERSITY OF NEVADA, RENO GIFT IN KIND FORM

Donor Contact Information (Please highlight any updates):

Donor 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
(Gift Description)

Donation to _____

(College/Department/Program/Special Event – please describe)

For Internal Use Only:

Workday Cost Center: _____ Unit: _____ Fund/Function: _____ Program/Gift: _____

The estimate 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

Print Name Date

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

The UNR Foundation is a 501(c)(3) charitable organization. Please consult with your tax attorney or financial advisor to determine if your gift is tax-deductible. Please return to: UNR Foundation, Mail Stop 0162, Reno, Nevada 89557-0162