

CARROLL UNIVERSITY  
Office of Institutional Advancement  
100 N. East Avenue  
Waukesha, WI 53186

Coordinator of Donor Records  
Janine Kujawa  
262-524-7239

### Gift-In-Kind Contribution Form

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

Street \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

DESCRIPTION OF GIFT-IN-KIND \_\_\_\_\_

PURPOSE OF GIFT: Describe how this item will be used by Carroll University.

I estimate the fair market value of this contribution to be \$ \_\_\_\_\_ \*\*  
Was gift appraised? \_\_\_\_\_ If yes, please attach a copy of the appraisal. Appraisal prepared  
by: \_\_\_\_\_ Phone number: \_\_\_\_\_

**\*\*Notes to donor:**

Carroll University gratefully acknowledges your gift-in-kind contribution. The following information pertaining to your gift-in-kind contribution is being provided for your convenience and does not constitute legal advice on behalf of Carroll University or their employees.

**You are strongly encouraged to consult with your tax advisor and refer to the IRS publications referenced below:**

- To claim a tax deduction for in-kind gifts valued between \$500 and \$4,999
  - The donor must complete Section A, Part I of IRS Form 8283.
- For gifts that exceed \$5,000, the **donor** must:
  - Complete Section B, Part I, II, III of IRS Form 8283 and submit the completed form to Carroll University to complete Part IV.
  - Submit a certified appraisal dated no more than 60 days from the date of the donation. The appraisal must be prepared, signed and dated by a qualified, third-party appraiser.

The value of any item, regardless of the amount, is used for internal gift reporting only – Carroll University is unable to include the estimated value on a donor receipt or acknowledgement. It is the responsibility of the donor to substantiate the fair market value for his/her own tax purposes.

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

Receiving Party Signature \_\_\_\_\_ Date \_\_\_\_\_

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**FOR INSTITUTIONAL ADVANCEMENT USE ONLY:**

Approved by: \_\_\_\_\_ (Approval by a member of Senior Staff)

AC Journal # \_\_\_\_\_

Donor ID # \_\_\_\_\_

Entry Date \_\_\_\_\_

Designation code \_\_\_\_\_