IN-KIND DONATION TRACKING FORM

DATE _____

Please fill out this form completely, including all applicable fields, save and rename the document to submit via e-mail for processing.

DONOR INFORMATION

☐ Mr. and Mrs. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Other _____

Donor Name

Company Name

Street Address

City State Zip

(_____)_____ _____

Phone Email Address

Recognition: _____

Name to be printed on AFI publications to acknowledge gift. **Please state if this gift is to be anonymous**.

GIFT INFORMATION

Thesis film name if applicable: _____ Gift date: _____

Form of gift: ☐ Equipment ☐ Services ☐ Other Goods

Donor's Estimate of Value $ _____

Request made by: Name/AFI Department/Program:

AFI Department/Program contact person, telephone extension and email address:

Detailed description of gift as it should appear in the acknowledgement letter:

COMMENTS/NOTES

The American Film Institute (AFI) is a non-profit organization under section 501(c)(3) of the Internal Revenue Code (FIEN 52-6072925) and contributions may be tax-deductible to the full extent of the law. In compliance with IRS regulations, a charity must determine a good faith estimate of benefits, if any, provided to donors.

AFI does not provide legal or tax advice and advises donors to seek professional advice in connection with donations as laws regarding charitable gift deductions change frequently. This communication may not be used for the purpose of avoiding tax-related penalties.