Small Gift-In-Kind Donation Form
(For Gifts-in-Kind valued less than $5,000)

Donor Name:__________________________________________
Individual’s Name or Name of Organization

Contact Person:________________________________________
Representative in the Organization

Address: _____________________________________________
Street ____________________________________________
City _____________________________________________
Zip _____________________________________________

Phone #: __________________ E-mail: ___________________________

I/We would like to donate: Please include a detailed description of item(s) to be donated.

________________________________________________________________
________________________________________________________________
________________________________________________________________

To the Utah Valley University Foundation for use in the Department of:

________________________________________________________________

Condition: _____ New _____ Used, in Excellent Condition
            _____ Used, in Good Condition
            _____ Used, in Poor Condition

VALUE OF GIFT:
I/We declare the fair market value of this contribution to be: $_______________ *

*For gifts valued under $5,000: The IRS defines fair market value as “the price a willing, knowledgeable buyer would pay a willing, knowledgeable seller when neither has to buy or sell.”

The value of any item, regardless of the amount, is used for internal gift reporting only. Utah Valley University Foundation 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. Please consult with your tax or financial advisor.

I/We have no objections to this donation being sold; however, I/we would prefer that any monies derived from the sale be used for the same department.

Donor Signature: ___________________________ Date: ______________________

UVU Area benefiting from this gift-in-kind—please fill in this information:
This gift-in-kind was received by UVU on ___________ by __________________________
Official Gift Date Name of Department Representative

Raiser’s Edge # of Donor: __________________________
Individual reporting gift: __________________________
Extention: __________
Department: __________________________
Mail Stop: __________

Where will this item be located on campus and how will it be used:

________________________________________________________________
________________________________________________________________

Will goods or services be provided in exchange for this gift: Yes ___ No ___ If yes, please describe and state the Fair Market Values:

=====================================================================
For Development Office Use-Date Received: __________ Index: _______ GIK List: __________