



Certification of Qualified Enterprise Zone Contribution

This form must be completed and certified before claiming the Colorado Enterprise Zone contribution income tax credit. Submit a copy of this certified form with your Colorado income tax return if your total contributions tax credit for the year exceeds \$250. Otherwise, retain a certified copy with your tax records. Tax credits are not available to contributors who receive a direct benefit from the contribution. Taxpayers who make both cash and in-kind contributions during the year should see FYI Income 23 for information on computing the credit.

Note- In order to claim an Enterprise Zone credit, you must electronically file your income tax return and the EZ Carryforward Schedule (DR 1366). For an electronic filing hardship exception, call 303-238-7378.

Pursuant to §39-30-103.5(7), C.R.S., information on the source and amount of enterprise zone contributions may be disclosed as a public record.

To be completed by Certified Organization or Zone Administrator Receiving Contribution

Last Name or Business Name		First Name		Middle Initial
Address				
City			State	Zip
SSN or Colorado Account Number			Phone Number ()	
Name of Organization, Program or Project Receiving/Benefiting from Contribution			FEIN	Phone Number ()
1. Cash contributed to you for enterprise zone project by person/organization above	Date (MM/DD/YY) ?	Amount of Contribution	Tax Credit	
Credit is 25% of the amount of contribution		\$	\$	
2. In-kind contributions: Description of, and your valuation of, non-monetary contributions to you by person/organization above. Credit for in-kind contributions alone is one-half of percentage allowed for cash contributions. Attach additional sheet if necessary.				
Item - Credit is 12.5% of the value of contribution	Date (MM/DD/YY) ?	Value of Contribution	Tax Credit	
		\$	\$	
		\$	\$	
3. Zone administrator-approved use to which contribution has been/will be put. Be specific.				

Certification of Receipt of Qualified Contribution

I, duly authorized Enterprise Zone Administrator or official of this certified Enterprise Zone organization, hereby certify the receipt of, and the value and use of these contributors.

Signature of Enterprise Zone Administrator or Authorized Official of Qualified Organization

Title	Date (MM/DD/YY) ?
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**Certification of Organization/Project — to be completed by Enterprise Zone Administrator**

I, duly authorized Enterprise Zone Administrator or official of this certified Enterprise Zone organization, hereby certify the receipt of, and the value and use of these contributors.

Name of Benefiting Organization, Program or Project

Date this project first approved by zone (MM/DD/YY) ?

Certification Period (MM/YY-MM/YY) ?

Address

City

State

Zip

To be signed if this form certifies an organization to receive direct contributions; leave blank if contribution is to you as zone administrator.

I, duly authorized enterprise zone administrator, hereby certify that the above named organization, program or project has been certified to receive direct contributions on behalf of the specified enterprise zone purpose. I further certify that the organization, program or project has been accepted by the state Economic Development Commission.

Signature of Enterprise Zone Administrator

Enterprise Zone

Date (MM/DD/YY) ?

* Become a registered user of www.Colorado.gov/RevenueOnline to see your assigned Colorado Account Number

Visit www.advancecolorado.com/ez for Enterprise Zone information including Enterprise Zone Administrator contact information.

For more information and answers to questions see FYI Publication Income 23, which is available at www.TaxColorado.com

For additional help, send a secure message through www.Colorado.gov/RevenueOnline or call 303-238-SERV (7378)