DR 0075 (03/05/13) COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0005

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.

New - 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						
Contributor's Name (print or type)		Social Security or Colorado Account Number*				
Address (street, city, ZIP)		Telepl	none Number			
Name of Organization, Program, or Project Receiving/Benefiting from Contribution	n Tax I.D.		mber	Telephone Number		
1. Cash contributed to you for enterprise zone project by person/organization above:	DATE	Ē	AMOUNT OF CONTRIBUTION	TAX CREDIT		
Credit is 25% of the amount of contribution.			\$	\$		

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	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>I, a duly authorized Enterprise Zone Administrator or official of this certified and the value and use of these contributions.</i>	Enterprise Zone organizati	ion, hereby certify the receipt of,		
Signature of Enterprise Zone Administrator or Authorized Official of Qualified Organiz	ation Title	Date		
Certification of Organization/Project—to be Comple	eted by Enterprise Zon	e Administrator		
Name of Benefiting Organization, Program or Project	Date this proje	Date this project first approved by zone		
Address	Certification F	Period		
To be signed if this form certifies an organization to receive direct contribution	ns; leave blank if contributio	on is to you as zone administrator		
I, the duly authorized enterprise zone administrator, hereby certify that the certified to receive direct contributions on behalf of the specified enterprise z or project has been accepted by the state Economic Development Commis	one purpose. I further certi			
Signature of Enterprise Zone Administrator	Enterprise Zone	Date		

*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).