



The University of Texas at Dallas  
Office of Development & Alumni Relations  
In-Kind Gift Acceptance Form

Date \_\_\_\_\_  
 School/Unit \_\_\_\_\_ Solicitor \_\_\_\_\_ Completed by: \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Is the gift benefiting more than one school/unit Yes No  
 If yes, please list units and their contact persons \_\_\_\_\_

**Donor Information**

Mr. Ms. Mrs. Dr. Mr. & Mrs. Dr. & Mrs.  Drs.

Donor's Name/Org \_\_\_\_\_ Contact Name \_\_\_\_\_  
*Personal thank you letter addressed to this person at org.*  
 Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Gift Information**

Type of In-Kind Gift	Art or Collection	Equipment	Other	_____						
	Intellectual Property/Patent	Software								
	Discount on Purchase (must be in excess of the standard "education discount")									
Description of Gift	. . . . .									
Benefit to University	. . . . .									
Value of Gift	. . . . .									
Condition of Gift	New	Good	Poor	Unknown	N/A	Source of Valuation	Internal	Donor	Appraiser	
Special Storage	Yes	No	If yes, please explain _____							
Requirements? Hazardous	Yes	No	If yes, please explain _____							
Concerns? Delivery Concerns?	Yes	No	If yes, please explain _____							
Restrictions on gift	Yes	No	If yes, please explain _____							
Additional comments/information	_____									

**Gift Acceptance**

I recommend acceptance of this by The University of Texas at Dallas

Dean's Signature \_\_\_\_\_

UTD Official Acceptance \_\_\_\_\_ Date \_\_\_\_\_  
(President or VP for Development and Alumni Relations)

**Completed form, along with support documentation\*, should be sent to the Office of Development & Alumni Relations, SPN 2.120. Questions should be directed to Gloria Muhammad, Director of Gift and Data Services at x. 2295.**

*\*Supporting documentation must include a gift letter from the donor. For gifts with a FMV of at least \$5,000, a certified third-party appraisal and IRS Form 8283 are also required.*

**Gift and Data Services Use Only**

Cost Center Name \_\_\_\_\_ Cost Center Number \_\_\_\_\_

For Internal Use Only