

To be completed by CONTRIBUTOR

Name of Contributor:  
 Address of Contributor:  
 NYS Tax ID or Social Security Number of Contributor:  
 Contributor Contact Person: Phone:  
 Amount of Contribution: \$ Date of Contribution:  
 This contribution is a \_\_\_ personal contribution \_\_\_ corporate contribution

To be signed and notarized by the contributor

I, \_\_\_\_\_, do solemnly affirm that to the best of my knowledge, information and belief, all the statements made herein are true and accurate. I am aware that the filing of a false instrument in connection with this application may constitute an attempt to defraud the State and may be a felony under the laws of the State of New York.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Title: \_\_\_\_\_

State of New York: (ss County of)

On this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, before me personally came \_\_\_\_\_, to me known, who, being by me duly sworn, did depose and say that (s)he resides at \_\_\_\_\_; that (s)he is the \_\_\_\_\_ of \_\_\_\_\_, the organization described in and which execute the foregoing instrument; that (s)he had the authority to execute same by order of the Board of Directors of said organization. And that (s)he signed his/her name thereto by like order and authority:

Signed by Notary Public

To be completed by a RESPONSIBLE OFFICER OF THE PROJECT SPONSORING ORGANIZATION

Name of Community Development Project: Challenge Re-location  
 C/D Number: 97C-006-0308 Name of Zone: Tompkins County

I, \_\_\_\_\_, do hereby acknowledge receipt of a contribution from the above named person in the amount and on the date indicated above. This contribution will be used exclusively for the Zone Capital Credit Community Development Project which was approved by the Zone Administrative Board and the NYS Department of Economic Development on December 19, 2007.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Title: \_\_\_\_\_

As Chairperson of the Zone Administrative Board, I do hereby approve the above named contributor as eligible to claim zone capital credits in the following amount.

|  |      |                                 |
|--|------|---------------------------------|
| Chairperson, Zone Administrative Board | Date | Zone Capital Credits Issued: \$ |
|--|------|---------------------------------|

As Commissioner of the NYS Dept of Economic Development, I do hereby approve the eligible to claim zone capital credits

|  |      |                                 |
|--|------|---------------------------------|
| Commissioner, NYS Dept of Economic Development | Date | Zone Capital Credits Issued: \$ |
|--|------|---------------------------------|

*Zone Capital Credits may be available to contributors to community development projects in Empire Zones which have been approved to offer such credits. A contributor may be eligible for credits equal to 25% of his/her contribution to a maximum of \$100,000 in credits. Contributions must be in the form of money. Contributions made prior to project approval are not eligible for credits.*

### **Instructions for Completing and Transmitting Application and Approval Process**

**Contributor:** Complete *Form Z7—Application for Eligibility to Claim a Zone Capital Credit – Community Development Project Contribution* in the appropriate section. Sign the form and have it notarized. Form Z7 and payment must be forwarded to the Sponsoring Organization for further processing.

**Sponsoring Organization:** Complete *Form Z7—Application for Eligibility to Claim a Zone Capital Credit – Community Development Project Contribution* in the appropriate section. Sign the form and attest to the use of the contribution for the approved project. Forward to the local Zone Administrative Board for approval.

**Local Zone Administrative Board/Zone Coordinator:** Review the application to determine if the contribution meets the criteria for approval. Determine the amount of credits to be issued. If approved, the Chairperson of the Board must sign the form and enter the amount of credits to be issued in the appropriate section of Form Z7. Forward the application to the NYS Dept of Economic Development, Empire Zones Office at 30 South Pearl St, Albany, NY 12245.

**NYS Department of Economic Development:** Review the application to determine if the contribution meets the criteria for approval. If approved, the Commissioner of Economic Development will sign the form in the appropriate section and assign a contributor identification number. A Form Z10 – *Eligibility to Apply for Zone Capital Credit Certificate* will be issued for each contributor. Once approved, the form and certificate will be sent back to the local zone coordinator.

**Local Zone Administrative Board/Zone Coordinator:** Obtain the signature of the Zone Administrative Board Chairperson on Form Z10. Mail Z10 to the Investor/Contributor.

**Contributor:** In order to claim the tax credit, Form Z10 must accompany the NYS Taxation & Finance DTF-602 form at the time of the contributor's annual tax filing period.