## ► See instructions.

A Name of Taxpayer	1	I Identification Number or Security Number	C Kentucky Corporation/LLET Account Number (if applicable)	
Street Address or P. O. Box			Telephone	
City	State	ZIP Code	E-mail Contact	
D Type of Entity:  □ Individual  □ Estate  □ Trust  □ Corporation  □ Limited Liability Pass-through Entity    □ General Partnership  □ Other				
E Submission Date of Application $\frac{1}{M} \frac{1}{M} \frac{1}{D} \frac{1}{D} \frac{1}{Y} \frac{1}{Y}$	F Amount of Endowment Gift		<b>G</b> Amount of Tax Credit	
H Name of Qualified Community Foundation or Affiliate Community Foundation	Federal Identification Number		Telephone	
······································			Fax Number	
Street Address or P. O. Box				
City	State		ZIP Code	
Under penalties of perjury, I declare that I have examined the application, including all accompanying documents and statements, and to the best of my knowledge and belief, it is true, correct, and complete.     By:				
Print Name:	rint Name: Title:			
Consent to Release Preliminary Authorization of the Endow Kentucky Tax Credit				
Notwithstanding the protections afforded taxpayers by Ky. Rev. Stat. (KRS) §131.190(1) and §131.081(15), I,authorize the Kentucky Department of Revenue to release to [print name of taxpayer]				
[name of qualified community foundation, county-specific component fund, or affiliate community foundation] my name and the preliminary approval (including the amount) of an Endow Kentucky tax credit approved pursuant to				
KRS §141.438 based upon the application for preliminary authorization of the tax credit for providing an endowment gift to a qualified community foundation, county-specific component fund, or affiliate community foundation.				
Signature of Taxpayer			Date	
Department of Revenue Use Only				
Preliminary authorization of Endow Kentucky tax credit.				

Date:

By:

Amount

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