<b>KE</b> EISENHOWER FOUNDATION	Kansas Tax Credit Program Donation Form <i>for Individual Taxpayers</i>						
If you	u are an <u>INDI</u>	<u>VIDUAL</u> taxpa	ıyer, please co	omplete the fo	llowing inform	nation:	
$\Box$ I am enclosing n	ny <b>2024</b> donatie	on to the Eisen	hower Foundat	ion Kansas Tax	Credit Program	n:	
□\$1,000	□\$10,000	□\$20,000	□\$30,000	□\$40,000	□\$50,000 Maximum	□ <u>\$</u> Other Amount	
Please mak	e checks paya	ıble to: Eisen	hower Found	lation   PO B	ox 295   Abil	ene, KS 67410	
			OR				
□ <b>Please char</b> □Visa	ge \$ MasterCa		Discover	□American	Express		
Card Number				Expiration date			
Name on Card				Signature			
		I reques	st my gifts be	e used for:			
$\Box$ Where ne	eded most	□Capital P	Project	Programs	3	Endowment	
Donor Signature(s	3)					Date	
Name(s) & Tax ID	O(s) as shown on	tax return					
Street Address				City, State		Zip	
<b>Eisenhower Foun</b> Effective for all taxa <b>Qualifications</b> Any resident individent <b>Credit Amount</b> The credit amount of <i>If the amount of credit</i> <b>Limitation of Cred</b> The amount of cred \$50,000 for any taxy	ble years beginn lual, corporate, is <i>equal to 50 p</i> <i>exceeds the taxpay</i> edit edit shall not ex payer subject to 7	ning <b>after Deco</b> or privilege tax <b>percent of the</b> is er's tax liability, t acceed \$25,000 the income tax The Eisenhower Fou	payer is eligibl total contribut the remaining cred for any reside: a on corporation undation is a 501 (d	e. Etion made duri Sit is not allowed to Int individual ta ns or the privile Science (1993) (1993) (1994) (	ng the taxable y o carryover or to be xpayer subject ge tax on finan 284	year. <i>refunded.</i> to the income tax o cial institutions.	
				4th Street   Abil werfoundation.ne			