



Foundation for the Compton CCD  
 1111 E. Artesia Blvd.,  
 Compton, CA 90221  
[foundation@compton.edu](mailto:foundation@compton.edu)  
 310-900-1600, ext. 2000

## GIFT-IN-KIND-ACCEPTANCE FORM

Please complete to report non-cash donations.

Date \_\_\_\_\_

Submitted by \_\_\_\_\_ Campus extension \_\_\_\_\_

Description of Gift \_\_\_\_\_

College Department/Program gift intended for \_\_\_\_\_

Where it will be stored/used \_\_\_\_\_

**Donor Contact Information**

Name \_\_\_\_\_

Company or Organization (if applicable) \_\_\_\_\_

Email \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Restrictions on gift if any \_\_\_\_\_

Donor's estimated fair market value of donation (attach donor's documentation) \_\_\_\_\_

Method/source of valuation \_\_\_\_\_

- **A valuation of \$5000+** - IRS requires donor to submit a formal third-party appraisal along with a signed [IRS form 8283 Section B](#) with their tax return. Donor to provide a completed [IRS form 8283](#) to the Foundation for the Compton Community College District for signature by the Foundation Director.
- **A valuation of \$500-\$4,999** - IRS requires donor to submit a completed [IRS Form 8283 Section A](#) with their tax return. Donor to provide a completed [IRS form 8283](#) to the Foundation for the Compton CCD for signature by the Foundation Director.
- The IRS requires that Compton College list the value of non-cash donations on our books at a reasonable market value. The "fair market value" of the non-cash donation stated on this form is to be used for internal purposes only. It is the responsibility of the donor to substantiate the value of a gift for tax deduction purposes.
- Contributions of time and services are not tax deductible. Ref. [IRS PNb 526](#)

**Acceptance Signatures**

Indicate Compton College's acceptance of the gift and verifies its usefulness and desirability in fulfilling the purpose of the college.

**Division Dean**

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Director of Purchasing and Auxiliary Services** (required if valuation is \$1000+)

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Vice President of Administrative Services**

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**President/CEO**

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_