

In-Kind Questionnaire

Please note that due to split-receipting rules in the Income Tax Act we are now required to make reasonable inquiry of donors of in-kind gifts. The following formula explains how the tax receipt amount will be determined:

$$\text{Eligible Amount of Gift} = \text{Fair Market Value of Property Donated} - \text{Advantage Received by Donor}$$

Note: If the donated item was acquired within the past three years, the Fair Market Value is deemed to be the donor's cost of acquiring the item.

Please respond to the following questions (circle Yes or No)

1. Did you acquire this item with the intent to donate it to a charity? **Yes / No**
2. Did you acquire this item within the last three (3) years? **Yes / No**

If you answered yes to *either* of the above questions, please provide us with the original cost of the item to you: \$_____

I hereby confirm the above information to be true and correct.

Full name: _____

Signature: _____

Date: _____

For more information on the Income Tax Act please contact the Canada Revenue Agency at www.cra.gc.ca.

Fine Wine Donation Form 2026

Date: _____

Company name: _____

Contact name: _____

Contact role/position: _____

Donor name: _____
(to appear on bid sheet)

Please respond to the following questions (circle Yes or No)

1. I would like to remain anonymous and have my name excluded from any recognition list(s). **Yes / No**
2. I require a tax receipt for my donation. **Yes / No**

Provide a mailing address for the tax receipt to be sent to:

Address _____ Unit/Apartment # _____

City _____ Postal Code _____ Prov./Terr. _____ Country _____

Phone _____ Email _____

Item Delivery/Pick-Up Information

Select your preferred method:

- ☐ I will deliver the bottle(s) to Second Harvest's head office (120 The East Mall).

Date of delivery: _____

- ☐ I will make arrangements for delivery to Second Harvest's head office.

Please describe: _____

- ☐ I need my donation to be picked up.

Preferred date and time of pick-up: _____

Pick-up address: _____

Please note: pick-up is only available within Toronto.

Additional comments: _____

Donor Name: _____

Donor ID: _____
(office use only)

Donor to complete (please print legibly)										Office use only		
Date acquired ¹	Acquired to be donated? ¹ (Y / N)	Original cost ²	Vintage year + description	Storage	Colour (R / W)	# of bottles	Bottle size	Fill (circle one)	Label (circle one)	Pre-appraisal value/bottle	Final receipt amount/bottle	Final receipt amount/wine
								Neck High Low Shoulder	Mint Bin Soiled Torn			
								Neck High Low Shoulder	Mint Bin Soiled Torn			
								Neck High Low Shoulder	Mint Bin Soiled Torn			
								Neck High Low Shoulder	Mint Bin Soiled Torn			
								Neck High Low Shoulder	Mint Bin Soiled Torn			
								Neck High Low Shoulder	Mint Bin Soiled Torn			
								Neck High Low Shoulder	Mint Bin Soiled Torn			
								Neck High Low Shoulder	Mint Bin Soiled Torn			

Donor to complete:

Total bottles _____

Total pre-appraisal value \$ _____

Office use only:

Total appraisal value \$ _____

Appraisal date _____

Appraiser name _____

Appraiser signature _____

¹This information is collected in accordance with the Income Tax Act. Your tax receipt may reflect a value less than the original cost and the appraised fair market value.

²The original cost must be listed if the item was acquired less than three years before the day that the gift is made/donated or if it is reasonable to conclude that, at the time the donor acquired the item, the donor was expected to make a gift of the item.

Please send this completed package to:

Digitally: fundraise@secondharvest.ca

Or by mail:

ATTN: Fine Wine Donations
Second Harvest
120 The East Mall
Etobicoke, ON, M8Z 5V5
Canada

Please print legibly. For us to properly evaluate your wines, please provide as much information as possible. To maintain catalogue accuracy, when we receive your wine donation it will be checked against your wine donation list. If there are any discrepancies, we will notify you immediately.