

Return all requests and attachments to:

Angel Investment Tax Credit Program
NM Economic Development Dept.
P.O. Box 20003
Santa Fe, NM 87504

Questions regarding the program:

angel.investment@state.nm.us – (505) 827-0300

See Program Guidelines for additional information
Including definitions and procedures

New Mexico Economic Development Department

ANGEL INVESTMENT TAX CREDIT APPLICATION FORM

**To be completed by the accredited
investor, eligible for the angel
investment tax credit.**

Section A: About the accredited investor

Name of the accredited
Investor _____

FEIN or SSN _____

Mailing address _____

City, state, zip _____

Contact name (if different) _____

Contact phone _____

Contact E-mail _____

1. If the cash investment was made **from** a trust, IRA or an entity with a federal identification number that is different from the individual completing this form, the name of the accredited investor should reflect the ownership information of the trust, IRA or other entity below. If yes, indicate the type of ownership below. If no, go to Step 2.

Indicate the type of ownership

Corporation

General Partnership

Limited Partnership

LLC or similar type

Subchapter S Corporation

Trust

Estate

Other – please indicate _____

Name of the entity _____

FEIN or SSN _____

Percent Ownership _____ %

Mailing address _____

City, state, zip _____

Contact name (if different) _____

Contact phone _____

Contact E-mail _____

2. Is the investor an accredited investor as defined under the Securities Act of 1933, Rule 501 of Regulation D? Yes No

If yes, under which definition of accredited investor?

Salary of \$200,000 or more per year

Salary of yourself and spouse is \$300,000 or more per year

Net worth of greater than \$1 million, excluding home

A trust of \$5 million or more

Other Please describe: _____

Section B: About the qualifying cash investment made

Amount of cash investment _____

Date of the cash investment _____

1. If the cash investment was **to** a middle party for the sake of investment purposes, such as into a trust, LLC, or an entity with a federal identification number that is different from the individual completing this form, and that entity subsequently made an investment into a qualified company, the name and type of the entity should be stated below. If so, indicate the type of ownership below, and skip Step 2 and go directly to Step 3 (The Entity will have to fill out a separate investment form). If not, go to Step 2 and continue.

Indicate the type of ownership

Corporation

General Partnership

Limited Partnership

LLC or similar type

Subchapter S Corporation

Trust

Other – please indicate _____

Name of the entity _____

FEIN or SSN _____

Percent Ownership _____%

Mailing address _____

City, state, zip _____

Contact name _____

Contact phone _____

Contact E-mail _____

2. Name of the qualified business to whom the investment was made _____

Contact name and phone number of the qualified business _____

What is the CRS identification number of the qualified business _____

3. Describe what was received in exchange for the cash investment? If stock, describe the type of stock (for example common or preferred) including any options, warrants, how many shares were received, and the official name of the business under which the stock is listed. If you received an interest in the business, please describe. Do not include any future obligations from a convertible note. If you received units of an LLC or partnership, please state the number of units and percent ownership following the investment.

Have you or a member of your immediate family or an entity affiliated with the accredited investor received or will receive compensation from the business in exchange for services provided to the qualified business within one year of the investment in the qualified business? If yes, please explain.

Please attach the following:

- A copy of the most current agreement between the accredited investor and the recipient of the cash investment.
- A copy of the accredited investor's wire transfer acknowledgement or cancelled check.

Section C: Claimants' Affidavit

Under penalty of perjury, I declare I have met the requirements for claiming this credit as set out in Laws 2007, Chapter 172, Section 1, as an accredited investor making a qualified cash investment, that I have examined the information this application and all supporting statements and documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of accredited investor _____ Date _____

Subscribed and sworn before me this _____ day of _____, 20_____

Notary Public _____

My commission expires _____

Disclaimer: Neither the NM Economic Development Department nor its employees warrants the accuracy or reliability of the information and transactions of qualified investors or qualified small businesses and do not endorse any content, viewpoints, products, or services and shall not be held liable for any losses caused by reliance on the accuracy, reliability or timeliness of such information. Any person or entity that relies on any program information, certifications or authorizations from NMEDD does so at his or her own risk. EDD's determination of a qualified investor, qualified small business, or qualified investment is only for the purposes of eligibility under the Angel Investment program.