

Request to Change Lease Information

Iowa Beginning Farmer Tax Credit Program (BFTC)

Below are the <u>ONLY</u> circumstances where a lease and/or project can be changed without needing to submit a new Beginning Farmer Tax Credit (BFTC) application:

- Terms of the lease are changing and are more favorable to the Beginning Farmer Including but not limited to the rent being reduced Complete page 2 of this packet
- 2. <u>Terms of the lease are changed to increase acres to the Beginning Farmer</u>

 Complete page 3 of this packet
- 3. Notification when Asset Owner or Beginning Farmer has changed their name (ONLY for names changes (i.e. marriage or divorce) NOT changes in ownership)

 For changes in ownership, other than a change of name, a new application is required

 Complete page 4 of this packet
- 4. <u>Upon Asset Owner's death, ownership is changed to surviving spouse</u>
 (ONLY when surviving spouse was an original joint owner at time of application)

 If surviving spouse was not a joint owner at time of application a new application is required
 Complete page 5 of this packet
- 5. <u>Upon Asset Owner's death, ownership is transferred to estate</u>
 Complete page 6 of this packet
- 6. <u>Upon the Asset Owner's death, ownership is transferred to a Trust</u>
 Complete page 7 of this packet
- 7. All other changes to a BFTC project will require a new application See Beginning Farmer Tax Credit Application and Checklist at lowaFinance.com

NOTE:

- An existing lease may be terminated by either the asset owner or the beginning farmer as provided in the lease or by law.
- The Asset Owner must notify IFA in writing of the termination within 30 days either by letter or email.

Questions: Contact the IADD office at 515.452.0467 or email BFTC@lowaFinance.com

Mail respective forms, documents and fees to:

Iowa Agricultural Development Division (IADD)

1963 Bell Avenue, Suite 200

Des Moines. IA 50315



Request to Change Lease Terms Favorable to Beginning Farmer lowa Beginning Farmer Tax Credit Program (BFTC)

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Dunia at Nove		Office Use Only	rad at IADD	
Project Number		Date of Request Received at IADD \$100 paid by Date		
Date of ong	Jinai application	\$100 paid by	Date_	
Complete, sign and submit Attach the new signed or a	·	-)
\$100 processing fee to:			,,	
Iowa A	1963 Bell A	velopment Division (venue, Suite 200 nes, IA 50315	(IADD)	
Asset Owner Name/s		Beginning Farmer		
Address		Address		_
CityState				
Email address				
Telephone				
		nendments Requestoned to the Begon Changing to:		End Date:
Reduce Cash Rent				
Reduce Acres Leased If acres are increasing, use page 3				
Switch to/from Cash Rent				
Increase BF % Crop Share				
Other (must benefit BF)				
Signatures Conf	firming Parties	Agree to Amendme	ent/s Requeste	ed
		_		
Asset Owner/s	Date	Beginning F	-armer/s	Date
Asset Owner/s	Date	Beginning Farmer/s Date		Date



Request to Change Lease Terms to Increase Acres Iowa Beginning Farmer Tax Credit Program (BFTC)

For IFA Office Use Only												
Project Number		Date of Request Received at IADD										
	Date of original application		Fee amount \$ Date)							
	Complete, sign and submit this form within 30 days of lease changes											
一												
\vdash	Attach the new signed or amended lease showing additional acres											
Ш	Attach FSA 156 form showing new acres with Asset Owner as owner and beginning farmer as operator					as						
	Application fee based on number of <u>additional acres</u> rented:											
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			Number of ye									
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	1 to 250 1 or more	\$350 \$450		\$450 \$550	\$500 \$600	\$550 \$650						
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	Iowa A	Agricultural Dev	elopment Di	ivision (I <i>P</i>	(DD)							
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		Des Moi	nes, IA 50315	5								
							Des Moines, IA 30313					
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Notification of Name Change of Asset Owner or Beginning Farmer lowa Beginning Farmer Tax Credit Program (BFTC)

For IFA Office Use Only				
Project Number Date of Request Received at IADD				
Date of original application				
When Asset Owner or Beginning Far	<mark>mer has ch</mark>	<mark>anged their name</mark>		
(ONLY for names changes (i.e. marriage or di	vorce) NOT cl	nanges in ownership)		
For changes in ownership, other than a change of name, a new application is required				
	•			
Complete the relevant portion of this form, sign	gn and submit			
Iowa Agricultural Deve	lopment Divi	sion (IADD)		
1963 Bell Avenue, Suite 200				
Des Moines, IA 50315				
200	30, (000 . 0			
Complete this section if Ass	et Owner's N	ame is Changing		
Current Asset Owner Name		Asset Owner New Name		
Name/s	Name/s			
Address	Address			
CityStateZip	City	State Zip		
Email address				
Telephone				
Signature of Asset owner		Date		
Complete this section if <u>Beginning Farmer's Name is Changing</u>				
Current Beginning Farmer Name		Beginning Farmer New Name		
Name/s	Name/s			
Address	_ Address			
CityState Zip	City	State Zip		
Email address	Email address	S		
Telephone	_ Telephone			
Signature of Beginning Fa	ırmer	Date		



Change Request When Asset Owner Dies and Asset Ownership Is Transferred to Joint Owner Surviving Spouse Iowa Beginning Farmer Tax Credit Program (BFTC)

For IFA Office Use Only				
Project Number Date of Request Received at IADD				
Date of original application				
When Asset Owner dies and Owners	ship Is Transferred to Joint Owner			
Surviving Spouse				
(ONLY when surviving spouse was an original joint owner at time of application)				
If surviving spouse was not a joint owner at time of application a new application is required				
Provide copy of death certificate or obituary				
Complete, sign and return this form to:				
Laura Amiaultural Davi	alammant Divisian (IADD)			
_	elopment Division (IADD)			
	enue, Suite 200			
Des Moines, IA 50315				
DC3 WOIII	es, IA 30313			
	,			
Name of Original Asset Owner	Name of Surviving Spouse			
Name of Original Asset Owner Name/s	Name of Surviving Spouse Name/s			
Name of Original Asset Owner Name/s Address	Name of Surviving Spouse Name/s Address			
Name of Original Asset Owner Name/s Address CityStateZip	Name of Surviving Spouse Name/s Address City State Zip			
Name of Original Asset Owner Name/s Address CityState Zip Email address	Name of Surviving Spouse Name/s Address City State Zip Email address			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone	Name of Surviving Spouse Name/s Address City State Zip			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone	Name of Surviving Spouse Name/s Address City State Zip Email address Telephone			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone SSN	Name of Surviving Spouse Name/s Address State Zip Email address Telephone SSN			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone SSN	Name of Surviving Spouse Name/s Address City State Zip Email address Telephone			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone SSN	Name of Surviving Spouse Name/s Address City State Zip Email address Telephone SSN			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone SSN	Name of Surviving Spouse Name/s Address City State Zip Email address Telephone SSN			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone SSN Signature Confirming	Name of Surviving Spouse Name/s Address City State Zip Email address Telephone SSN G Change/s Requested			
Name of Original Asset Owner Name/s Address CityStateZip Email address Telephone SSN	Name of Surviving Spouse Name/s Address City State Zip Email address Telephone SSN G Change/s Requested			
Name of Original Asset Owner Name/s	Name of Surviving Spouse Name/s Address City State Zip Email address Telephone SSN G Change/s Requested			



Change Request When Asset Owner Dies and Asset Ownership Is Transferred to their Estate lowa Beginning Farmer Tax Credit Program (BFTC)

	ice Use Only			
	Date of Request Received at IADD			
Date of original application				
Miles Accet Owner/s Discound Accet	in the major was all to the six Fatota			
When Asset Owner/s Dies and Asset	is transferred to their Estate			
Describe assessed describe assettle assettle assettle assettle				
Provide copy of death certificate or obituary				
Documentation naming Executor or POA for estate				
Complete, sign and return this form to:				
Iowa Agricultural Development Division (IADD)				
1963 Bell Avenue, Suite 200				
Des Moines, IA 50315				
If the asset is transferred to a new owner (c	,			
spouse) when the estate is closed, no additional spouse.				
asset owner must submit a new application	to receive future tax credits.			
Name of Original Asset Owner Name of Attorney or Executor				
Name/s				
Address				
CityStateZip	City State Zip			
	Email address			
Telephone	Telephone			
Signature Confirming Change/s Requested				
Signature of Attorney or E	xecutor Date			
Please be sure to inform your beginnin	g farmer of changes to asset ownership,			
including your undate	ed contact information			



Change Request When Asset Owner Dies and Asset Ownership Is Transferred to their Trust Iowa Beginning Farmer Tax Credit Program (BFTC)

For IFA Office Use Only				
		Date of Request Received at IADD		
	Date of original application			
When Asset Owner Dies and Asset Ownership Is Transferred to their Trust				
_				
Ш	Copy of death certificate or obituary			
	POA or copy of Trust document confirming person signing documents has authority to sign for Trust			
	New lease signed by Trustee or POA and beginning farmer with the same terms as the original lease. The lease ending date cannot extend beyond original application ending date			
	Updated FSA 156 form showing new Trust name with same beginning farmer and farm acres			
	Complete, sign and return this form to:			
Nam	1963 Bell Ave Des Moine Asset Owner ne of Original AO	contact for Trust Name/s Address City State Zip Email address Telephone		
Signature Confirming Change/s Requested				
Signature of Trustee Date				
Please be sure to inform your beginning farmer of changes to asset ownership, including your updated contact information				