Form **6497**
(Rev. October 1987)
Department of the Treasury
Internal Revenue Service

Information Return of Nontaxable Energy Grants or Subsidized Energy Financing

For calendar year 19 ____ .

OMB No. 1545-0232
Expires 6-30-90

Please Type or Print

1 Payer's name	**3** Payer's **employer identification number**
2 a Address (number and street)	**4** Payer is agent for
b City, state, and ZIP code	**5** Program name or number

6(a) Recipient's name, address, and ZIP code	Complete 6(b) or 6(c)		**6(d)** Total amount of grant	**6(e)** Total amount of financing
	6(b) Recipient's social security number	**6(c)** Recipient's employer identification number		

For Paperwork Reduction Act Notice, see back of form.