



## 2017 Ingram Micro Matching Gift Program

Ingram Micro recognizes the importance of charitable nonprofit organizations. To support the work of these organizations in our communities, Ingram Micro matches a percentage of associates' contributions to qualified charitable organizations\*.

### Here's How It Works

- All Ingram Micro associates with **six continuous months of service** are eligible to participate in the Matching Gift Program.
- Ingram Micro will match 100% of associate gifts of **at least \$50, or up to \$1,500** in total gifts, per person per calendar year.
- Any nonprofit, charitable health care, education, civic, environmental or cultural organization is eligible for the matching gift program provided it is located in the United States and is recognized as tax exempt by the Internal Revenue Service under *Section 501(c)(3)* of the Internal Revenue Code and is not a private foundation, faith-based or politically affiliated organization. Public schools are also eligible.
- To verify that the organization you are donating to is recognized by the Internal Revenue Service under *Section 501(c)(3)* visit: [www.irs.gov/charities](http://www.irs.gov/charities).
- Donations must be made and Ingram Micro must receive a complete request form from recipient organizations during the same program year. Requests are processed on a **first come, first served** basis until budget is depleted.

### The Process Is Simple

1. Donor/Associate must complete the electronic form below and forward it with your donation to the eligible organization\*. For recurring donations, please bundle more than one donation per request.
2. Recipient organizations must complete and return a signed form within 30 days from the date of the donor's gift.
3. Recipient organization, must return the complete request form to: [communityrelations@ingrammicro.com](mailto:communityrelations@ingrammicro.com) or mail to Ingram Micro Inc., Attn.: Community Relations, 3351 Michelson Drive, Suite 100 Irvine, CA 92612

Questions? Contact: [communityrelations@ingrammicro.com](mailto:communityrelations@ingrammicro.com)

*\*The following are not considered for support:*

*Religious or faith based organizations and political organizations are generally excluded for support in an effort to avoid potential conflicts with non-discrimination laws. Ingram Micro is committed to providing an open, diverse, and nondenominational working environment. We will not support any program which requires exposure, adherence to, or conversion to any religious doctrine in order to be a beneficiary of the program. To clarify, a direct service program run by a faith-based organization may be eligible, provided that the program's beneficiaries are not encouraged or required to learn about, adhere to, or convert to that organization's religious doctrine as a condition of receiving service from the program.*

## 2017 Ingram Micro Matching Gift Program Form

**Donor/Associate: Complete section 1. Be sure to sign and date, (electronic signature accepted). Provide forms to recipient organization along with donation.**

### **SECTION 1:**

Donor/Associate Full Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_  
Work Location \_\_\_\_\_  
Date of First Day of Employment at Ingram Micro mo \_\_\_\_\_/day \_\_\_\_\_/year \_\_\_\_\_  
Name of Recipient Organization \_\_\_\_\_ Amount of Donation \$ \_\_\_\_\_  
Date of Donation (or last recurring contribution) mo \_\_\_\_\_/day \_\_\_\_\_/year \_\_\_\_\_

***I hereby certify that this is a personal contribution and affirm that it meets the eligibility requirements and gift restrictions of Ingram Micro's Matching Gift Program.***

Donor/Associate Signature (electronic signature accepted) \_\_\_\_\_ Date \_\_\_\_\_

**Recipient Organization: Complete Section 2, sign and date (electronic signature accepted).  
Return complete forms within same program year via email : [communityrelations@ingrammicro.com](mailto:communityrelations@ingrammicro.com)  
or mail to: Ingram Micro Inc., Attn.: Community Relations 3351 Michelson Drive, Suite 100, Irvine CA 92612**

### **SECTION 2:**

Name of Organization \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Federal Tax ID Number \_\_\_\_\_  
Contact Person \_\_\_\_\_ Title \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_  
Amount of Contribution Received \$ \_\_\_\_\_ Date Received mo \_\_\_\_\_/day \_\_\_\_\_/year \_\_\_\_\_  
Will your program's beneficiaries be encouraged or required to learn about, adhere to or convert to your organization's religious doctrine as a condition of receiving service from the program? YES  NO  N/A   
Does your organization influence legislation or participate or intervene in political campaigns on behalf of or against any candidate of public office? YES  NO  N/A

***I certify that the above information is correct. The gift has been received, it represents the gift of one person only and it will be used to support the primary objectives of this organization which is classified as tax-exempt under Section 501(c)(3) of the Internal Revenue Service Code.***

Organization Signature (electronic signature accepted) \_\_\_\_\_ Date \_\_\_\_\_

### **REQUIRED DOCUMENTS**

1. Copy of donor's contribution check or record of donation via cash/credit card, PayPal ( *supplied by donor or recipient organization* )
  2. A complete form including donation receipt, all questions answered, signature and date. (electronic signature accepted)
  3. Copy of organization's IRS letter designating tax-exempt 501(C3) letter status ( *supplied by recipient organization* )
- \*\* Incomplete forms will be disqualified and gift will not be matched.**

### **INGRAM MICRO USE ONLY:**

Payment Card # \_\_\_\_\_ Date IM matched donation mo \_\_\_\_\_/day \_\_\_\_\_/year \_\_\_\_\_