

CORBIS MATCHING GIFTS PROGRAM

Corbis has a Charitable Contributions Program. The larger portion of this program is in the form of company contributions that match employee contributions. We believe that there are two advantages to a substantial matching contribution program: it encourages you to contribute and show your concern about the educational opportunities and quality of life in your community; and, by contributing, you determine who receives most of the company contributions.

Corbis will match contributions dollar-for-dollar up to \$10,000 per employee per calendar year. Your contributions can be to public and private educational institutions in the U.S. that are accredited or approved by a recognized accrediting agency and/or to community social service, civic, health and cultural organizations in the U.S. that are tax-exempt under Section 501(c)(3) of the U.S. Internal Revenue Code. **Contributions to fraternal or political organizations, religious institutions or programs operated exclusively for members will not be matched. The Company will also not match memberships in athletic clubs, alumni associations, zoos, parks, museums, etc. where membership primarily benefits the donor.** Corbis will match gifts of cash, personal checks, and credit cards.

The necessary Matching Gifts Form is attached below. Please complete the **Employee Portion** of this form and mail this entire page, along with your gift, to the named educational institution or charitable organization. If you have any comments or questions regarding this program, please contact the Human Resources Manager or the Accounting Manager.

EMPLOYEE PORTION (please print)

I enclose my gift of \$ _____

cash check credit card (check one) to:

Date of Gift

Name of Institution or Organization

Name of Employee

Signature

EDUCATIONAL INSTITUTION OR COMMUNITY ORGANIZATION

Fill out this entire bottom section and return within 60 days of donor's gift to:

Corbis
Att'n: HR, Matching Gifts
710 Second Avenue, Suite 200
Seattle, WA 98104

_____ Name of Institution or Organization		
_____ Address		
_____ City	_____ State	_____ Zip

REQUIRED FOR PROCESSING	
***Recipient <i>Educational Institution</i> Only:	
_____ Name of Accrediting Association	
***Recipient <i>Organization</i> Only: Please attach a copy of the Internal Revenue Code Section 501(c)(3) letter indicating your tax-exempt status.	
501(c)(3) attached: Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

I verify receipt of a gift from _____

in the amount of \$ _____

Title

Authorized Signature

Date

