

FMC Corporation

Matching Gift

Plan



Purpose

The FMC Matching Gift Plan established in 1973 provides significant support—through both company and employee contributions—to strengthen not-for-profit organizations across the nation.

Providing a 1-to-1 match, the Plan is designed to literally double the employee's contribution. This means that the designated organization will receive two gifts—your gift and a gift of the same amount from FMC Corporation.

Together as partners, FMC and its employees are making a difference through their support to expand knowledge, increase understanding and enrich the artistic and cultural expression and sustain the world in which we live.

Contribution Guidelines

FMC Corporation will match charitable contributions to eligible organizations made in cash or marketable securities, of \$25 or more, to a maximum of \$10,000 per employee per year.

Contributions may not include:

- those made to health and human services organizations
- those made in support of religious activities for the purpose of furthering religious doctrine
- those made by a group of FMC employees
- those made in remission or in lieu of other payments (e.g., tuition, fees, dues, church contributions, insurance premiums, etc.) or in return for any other benefits
- a pledge for payment not yet made
- other payments not regarded by FMC Corporation as personal contributions
- those made to fulfill membership requirements



Eligible Organizations

The Matching Gifts program is an initiative of FMC Corporation and all contributions through this program must be consistent with the goals and objectives of FMC Corporation.

All organizations under the following categories must be located in the United States and be tax exempt with a 501(c)3 in their own name or be an instrumentality of a state or local government as provided by Section 170(c) 1 of the Internal Revenue Code.

Higher Education

Any college, university or association of colleges and universities that have been accredited by the appropriate regional or professional organization.

Gifts may be earmarked for a specific department, such as the Engineering Department or Business School, by designating this preference on the line marked "Fund/Purpose" in Part A of this form. The FMC match will be made to the same designation as your gift.

Participants may give to institutions other than those they attended.

In addition, contributions to the following educational associations are eligible:

**American Indian College Fund
National Hispanic Scholarship Fund
The United Negro College Fund**

Elementary and Secondary Education

Gifts to accredited K-12 schools both public and private are eligible.

Arts and Cultural Organizations

This category includes museums, performing arts groups, libraries, and other arts and cultural organizations that are organized as public charities and serve the public good.

Conservation and Civic Organizations

This category includes zoological societies, botanical gardens and other environmental and conservation organizations that sustain the world in which we live.



Eligible Participants

To participate in the Plan, you must be a full-time employee of FMC Corporation for more than six months. Spouses of eligible employees and directors of the company and their spouses may also take advantage of the Plan.

Procedures

Complete Section A of this request form and mail the entire brochure along with your gift to the eligible organization. A separate form must be completed for each gift.

The recipient organization will complete Section B and forward the entire form to FMC Corporation Matching Gift Plan.

Corporate matching grants are processed on a quarterly basis. You will receive an acknowledgement letter from the Matching Gift Plan after the gift has been matched.

Administrative Conditions

FMC Corporation reserves the right to amend, suspend or terminate the Matching Gift program at any time without prior notice. The Corporation reserves the right to rule on all questions regarding interpretation, eligibility and administration of the program, and its decisions are final.

An advanced determination regarding what constitutes a qualified contribution or an eligible organization may be obtained by contacting:

**FMC Corporation
Matching Gift Plan
P.O. Box 7516
Princeton, NJ 08543-7516
FMC@EasyMatch.com
888-362-4483**

Form A

To be completed by employee.

Last Name First Name Middle Initial

FMC Employee Number Date of Employment

Home Address

City State Zip Code

FMC Group Division

Location Work Extension E-Mail Address

Hourly (non-exempt) Salaried (exempt) Director Spouse

Payment Plan

Enclosed is my cash contribution of \$_____ or

_____ shares of _____ estimated at \$_____

a share for a total of \$_____.*

**FMC will determine the value of your gift based upon the median price per share on the day the gift was made.*

Given to _____
(Name of Recipient Organization)

Date of Contribution Fund/Purpose (If Designated)

Employee (Spouse) Relationship to Institution

Student Alumnus Volunteer Board Member Other

I hereby certify that the above contribution is my or my spouse's personal gift. I further certify that this gift does not represent money collected from others, and that no member of my family, or myself, will receive—either now, or in the future—any benefit in consideration of this contribution.

Signature Date

Form B

To be completed by recipient organization.

Federal Tax Identification Number (EIN Number)

Legal Name of Recipient Organization

Mailing Address

City

State

Zip Code

Type of Organization:

- Public Education Private Education
 Art and Culture Conservation and Civic

Has your organization been a recipient of an FMC Corporation Matching Gift contribution in the past ? Yes No

If no, please submit either a copy of your 501(c)3 designation letter or verification that your organization is an instrumentality of a state or local government as provided by Section 170(c)1 of the Internal Revenue Code.

Tax deductible amount of the gift from Section A: _____

Received from: _____
Employee (Spouse) Name

Date received: _____

I hereby certify that a contribution, as described in Section A of this form, was received by the named organization, and that both the contribution and the recipient organization meet the eligibility requirements of the FMC Matching Gift Plan as described in this brochure.

Name

Title

Authorizing Signature

Date

Submission Deadline:

Participating organizations must submit Matching Gift forms no later than 90 days after receipt of the employee's gift to be eligible for a match.

Please Mail This Matching Gift Request Form To:
FMC Corporation
Matching Gift Plan
P.O. Box 7516
Princeton, NJ 08543-7516