



KPMG FOUNDATION MATCHING GIFT FORM

Employee Name (Please print) (Indicate one: Mr., Ms., Mrs.) _____ Office #: _____

Telephone: _____ Office Location: _____ **Has your office address changed since your last donation?** _____

Email Address: _____ 7-Digit Employee ID # (Required) _____

Home Telephone Number (Retirees Only) () _____

The minimum gift eligible for a match is \$50 for employees and \$250 for partners (\$100 if the partner is not a graduate of the school). Effective July 1, 2014, for employees, partners and retired partners the Foundation will match up to \$7,500 per school per Foundation's fiscal year (July 1-June 30). Eligible colleges/universities must offer four-year degrees or above and be the alma mater of the donor or a school at which KPMG LLP conducts an active recruiting program. For more information refer to <http://hrweb.us.kworld.kpmg.com/hrweb/foundation/gift/index.asp>.

The Foundation match may not be restricted to athletics related gifts of any kind.

For Office use:

Memorial Recorded? Yes No

MO _____

Deposit Date _____

Deposit Batch # _____

PS Entry Date _____

Donors should expect written acknowledgement of their gift(s) from the KPMG Foundation within six weeks.

- 1. Active Employee
- 2. Partner
- 3. Retired Partner
- 4. Retired Employee

Practice

- Audit
- Advisory
- Tax
- Business Process Group

Donor's Mailing Address (required for retired partners and retired employees)

Have my donation along with the Foundation's match made payable to: _____

Please Prepare a Separate Form for Each Gift

(Exact name of college or university)

School Code (required)

(You can find the correct school code number by going to the Internet at: www.collegeboard.org.)

Are you a graduate of the above college or university? Yes No

I confirm that I am not receiving any additional benefits (e.g., sports tickets or reduced tuition for relatives) as a result of this matched gift.

*This gift is to be: unrestricted restricted to the school of business
 other (if "other" selected, please include name of fund or purpose) _____ (Athletics gifts not matched)

Special Instructions: _____

Note: If you have not checked off one of these three boxes, the money will be directed as determined by the KPMG Foundation. If the Restricted Purpose cannot or is not fulfilled by the university, the Foundation Trustees will negotiate with the university to redirect the funds to an appropriate use.

Payment Option 1: PAYROLL DEDUCTION (employees only)	Payment Option 2: GIFT MADE THROUGH COMMUNITY GIVING CAMPAIGN (CGC)
<input type="checkbox"/> I request that the KPMG Foundation set up deductions as instructed below. (Complete information below to begin payroll deductions. The 1 st deduction should begin within four weeks of the Foundation receiving your form.) \$ _____ per pay period for a Total Contribution of \$ _____. OR Continuously deduct \$ _____ per pay period until I notify the KPMG Matching Gift Coordinator in writing that I wish to end this series of deductions. Please note: Only one (1) payroll deduction may be on going at a time. Others will commence, one at a time, after previous deductions are completed. Donation will be disbursed only after the goal amount is reached. (Please allow up to 4 weeks from date request is submitted to KPMG Foundation to process.) Continuous deductions will be disbursed when the \$50 minimum amount eligible for a match is fulfilled.	<input type="checkbox"/> I requested deductions to be made through the Community Giving Campaign (CGC). Attached is a copy of the confirmation page I received from the CGC. (Please note: if you instructed the CGC to send your contribution directly to the university, you will need to include documentation from the university acknowledging receipt of your gift with this form.)
Payment Option 1: PARTNER DRAWING ACCOUNT(partners only)	Payment Option 3: CHECK DONATION
<input type="checkbox"/> I request that the KPMG Foundation deduct funds from my partner drawing account as instructed below. (please note, forms received by the 20 th of each month will be processed in the same month) Total Contribution of \$ _____	<input type="checkbox"/> Enclosed is my check made payable to The KPMG Foundation: Donor Check # _____ Date of Check _____ Amount of Check \$ _____
Payment Option 4: CONTRIBUTION MADE DIRECTLY TO UNIVERSITY	
	<input type="checkbox"/> My contribution of \$ _____ has already been sent to the school. Documentation from the school acknowledging receipt of my gift is attached.

Donor Signature: _____ Date _____

Please note: You must sign this form in order for your contribution to be processed. If you do not have an electronic signature, you may print out a copy of the form, complete it, sign it by hand, and send it to us by office or U.S. mail. The KPMG Foundation did not provide any goods or services to the Donor in consideration, in whole or in part, for the donation described above. Please return forms and checks to: KPMG Foundation, 3 Chestnut Ridge Road, Montvale, NJ 07645. For help call Tara Perino, Matching Gift Coordinator, at 201-307-7932. Form Revised 7-3-13