



Employee Matching Donation Program

Keurig Green Mountain, Inc. believes in using the power of business to improve our quality of life, both locally and globally. We offer to match **up to \$1000.00** of employees' charitable donations **per calendar year**. Organizations that receive a match from Keurig must have I.R.S. non-profit status with a valid 501(c)(3) identification number, a primary mission that is non-discriminatory, non-political, and the funds must be intended for activities that are secular in nature with a broad community benefit.

If an employee has a donation receipt that includes name of the organization, the organization's 501(c)(3) tax ID number, employee name and amount of the donation, this form of verification by the recipient organization is not needed. Employees can upload the receipt directly to the self-service matching donations platform. If a donation receipt is not attached, the employee shall submit this form to the recipient organization to complete. The donation receipt **must** include the organization's 501(c)(3) tax ID number, employee name and amount of the donation. If it does not, the organization must verify the donation.

This form is to be completed by the non-profit organization if an official donation receipt has not been provided to the employee.

The employee listed below has requested Keurig Green Mountain, Inc. to match a donation to your organization. To receive the match amount noted below, please fill out the information below, sign this form, and return it to the employee to submit through our self-service matching donations platform. A scanned copy may be sent to the email address of the employee or a hard copy via regular mail at the following address:

Keurig Green Mountain, Inc.
ATTN: EMPLOYEE NAME
33 Coffee Lane
Waterbury VT 05676

Forms must be submitted WITHIN 60 DAYS OF THE DATE LISTED ABOVE BY THE EMPLOYEE.

Part 1 (to be completed by employee)

_____ requests receipt of donation to
(Name of employee)
_____ in the amount of \$ _____
(Name of Non-Profit Organization) (Amount donated)

Part 2 (to be completed by organization)

We request Keurig Green Mountain, Inc. send the matching donation indicated above to:
Organization Name: _____
501(c)(3) Federal Tax ID Number: _____
Attention: _____
Address: _____
City: _____ State: _____ Zip: _____
Name of Representative: _____ Phone: _____

KEURIG

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Signature: _____ Date: ____/____/____