

Donation Matching Program



**LUCKY
LINE
PRODUCTS**

Established 2011

LUCKY LINE PRODUCTS, INC. DONATION MATCHING PROGRAM

Introduction:

Lucky Line Products, Inc. is proud to announce our new Donation Matching Program. This program is designed to encourage and support employees in their charitable gift-giving contributions. Through this program, employees can increase their donations made to qualified organizations by utilizing corporate charitable dollars.

Policy Description:

Lucky Line Products, Inc. will match monetary contributions made to qualified charities dollar for dollar up to \$100 per calendar year per employee, with a minimum contribution of \$25. In order to receive a matching contribution, employees are required to fill out the DONATION MATCHING PROGRAM Form.

Eligibility:

To be eligible, the donor must be a regular full-time or part-time employee.

To be eligible, the charitable non-profit organization must be recognized as a 501©(3) institution under the Internal Revenue Tax Code. These types of organizations are published by the U.S Department of Treasury and can be verified by going to <http://www.irs.gov/app/pub-78>.

Whether an organization is eligible to receive matching contribution is determined solely by Lucky Line Products, Inc. Donations must be made in the form of cash, check or credit card and must be made from employees personal resources. Donations cannot be designated or made payable to an individual.

Exclusions:

- Donations of real or personal property.
- Amounts paid for tuition, fees, memberships, dues, tickets, meals, entertainment, field trips, subscriptions, premiums or student fees and the like.
- Amounts collected from others ie., group gifts, walk a thons, or events.
- Contributions made to a political party.
- Contributions made to organizations with ties to terrorist groups.

The Company reserves the right to amend or terminate the program at any time, at its sole discretion. Participating in this program is voluntary and will be at the initiative of the employee.

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How to Apply:

To apply for matching funds, complete and sign the donor section of the Donation Matching Program Application Form. The form must include a receipt from the charitable organization that includes details and the purpose of your donation. Submit the form to the Human Resource department for verification and further processing.

Applications for donations made in any given year must be received by Lucky Line Products, Inc. by March 1 of the following year in order to qualify for a match.

Matching donation funds are distributed to the non-profit organization and will be designated for the same purpose stated by the donor on the application form. With your permission, your name will be shared with the charitable organization if you select this option on the form.

Only the charitable portion of the contribution made by you will be qualified as tax-exempt under the IRS code and represents the only part of the gift eligible for a match. For federal income tax purposes, this means that the portion matched will not include the fair market value of benefits received in return for the contribution (such as value of food, tickets, membership, tuition or other tangible return).

Additional copies of this form and application may be obtained from www.benefitstracker.com.

If you have any questions or need additional information contact:

Wendi Kane
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LUCKY LINE PRODUCTS, INC.

DONATION MATCHING PROGRAM FORM

Directions:

Please review policy description, eligibility, and exclusions before completing this form to ensure proper processing and matching by the program. Please print clearly.

To be completed by the donor:

Employee Name:	
Employee Email Address:	Donation Amount:
Name of Organization:	Tax ID#:
Type or Reason for Donation:	Contribution Date:
Please share my name with the non-profit charitable organization. Circle: YES or NO	
<i>I certify that, to the best of my knowledge, this donation meets the terms of the program.</i>	
Donor Signature:	Date:

To be completed by the human resource department:

Approved \$:	Approved Date:
Approved By:	Issued Date:

ACKNOWLEDGEMENT TO EMPLOYEE OF MATCHING DONATION: This is to advise you that Lucky Line Products, Inc. has issued a check to the above Charitable Non-Profit organization in the amount of \$_____ on _____.