



Matching Gifts Program Guidelines

MasterCard International offers the Matching Gifts Program to encourage and support the generosity and community involvement of employees worldwide. The Program provides company matching funds to the charitable organizations employees personally support. To maximize the impact of employee charitable giving, MasterCard matches, dollar for dollar, individual donations made by eligible employees, retirees, and global board members, up to (maximum corporate match) US\$5,000 per year, to the nonprofit groups or educational institutions of their choice. MasterCard reserves the right to interpret and administer the program at its sole discretion including, but not limited to, decisions regarding eligibility. MasterCard may suspend, amend, or discontinue the program at any time for any reason.

WHO IS ELIGIBLE TO PARTICIPATE?

- Active, full-time MasterCard International employees who have completed at least six months of continuous service.
- MasterCard International retirees.
- MasterCard Global Board of Directors.
- Spouse's gifts are **not** eligible.

WHICH INSTITUTIONS QUALIFY TO RECEIVE MATCHING FUNDS?

All U.S. institutions must be recognized by the Internal Revenue Service as tax exempt and designated a public charity under Section 501(c)(3) of the IRS Code or as an instrumentality of a federal, state or local government as provided by Section 170(c)(1) of the Code.

All non-U.S. institutions must be certificated nonprofit by the applicable authority in their country of origin.

In addition, educational institutions must be accredited by a regional or professional accrediting agency.

Eligible organizations include, but are not limited to: colleges and universities, private and public elementary and secondary schools, organizations that serve youth, museums, libraries, hospitals, human service agencies, and environmental and cultural organizations.

WHAT IS NOT ELIGIBLE FOR MATCHING?

- Gifts made by a group of employees and/or other persons, represented as one gift. "No Collected or Pooled Funds": Gifts must be individual, personal contributions.
- Multiple matching gifts forms submitted by an individual employee for a specific team activity. For example, an employee may submit only **one** matching gifts form per team activity, e.g., walkathons, bowl-a-thons.
- Gifts must be charitable contributions, i.e., made with donative intent without expectation of personal benefit to donor, donor's family, or anyone designated by donor.
- Gifts that result in you or a family member receiving a benefit (e.g., dinner, raffle and/or sporting event tickets, parking privileges, club dues, membership fees, etc.)
- Gifts in lieu of payment of tuition or medical bills; dues to alumni(ae) or similar groups; subscription fees for tickets or publications; insurance premiums; bequests of life income trust arrangements; or gifts of real or personal property (or any part of above).
- Gifts to religious organizations (e.g., churches, synagogues, etc.), or programs aimed at propagating a particular faith or creed, or programs that are otherwise religious. Some secular community service programs, such as soup kitchens, shelters for the homeless, job banks, etc. even though sponsored by religious organizations **are** eligible for matching gifts.
- Gifts to organizations which discriminate with respect to membership and/or the provision of service or use of facilities.
- Gifts to groups which in MasterCard's judgment address issues by unacceptable means including, but not limited to, adversarial and confrontational tactics.

WHAT ARE THE PROVISIONS OF THE PROGRAM?

- Gifts of US\$25 (or local equivalent) or more will be matched on a 1-to-1 basis up to a combined total of (maximum corporate match) US\$5,000 per contributor per calendar year.
- Gifts must be personal contributions made directly to approved institutions.
- Gifts must be in the form of credit card, cash or check.
- Pledges will not be matched until they are paid. Installment payments will be treated as separate contributions.

DOUBLE MATCH FOR DISASTER RELIEF

Realizing that employees want to respond to urgent disaster relief needs, MasterCard will *double match* (donate US\$2 for every US\$1 donated by an employee) contributions **only** to the American Red Cross, International Federation of Red Cross/Red Crescent Societies, or AmeriCares. Please **specify the disaster** on request form and form of payment, and follow the same application process. Indicate "Disaster Relief" on the form. (The maximum annual corporate match is US\$5,000.)

HOW THE PROGRAM WORKS

- The eligible participant should complete Part 1, signify by signing that the gift complies with the provisions of the program, and mail this form, with the donation, to the institution.
- A financial and/or other executive officer of the recipient institution should complete and countersign Part 2, thereby certifying that the contribution has been received and complies with program provisions.
- **The institution should then forward the entire form to:**
MasterCard International Matching Gifts Program
c/o The JK Group Inc.
P.O. Box 2195
Princeton, NJ 08543-2195
(*Faxed copies will not be accepted.*)

The JK Group Inc. will process applications and eligible gifts will be matched and distributed to each institution four times a year.

| Applications Received by: | Grants Paid by: |
|---------------------------|-----------------------|
| March 1 | Last day of March |
| June 1 | Last day of June |
| September 1 | Last day of September |
| December 1 | Last day of December |

IS THERE A TIME LIMIT FOR MATCHING MY GIFT?

- All eligible, completed matching gifts forms must be **received by** The JK Group no later than **December 1** in order to be charged to the current year. All applications received after December 1 will be charged to the Donor's limit of the following year.
- Gifts must be registered within one year of the date of payment by credit card, cash or check. Gifts registered after that time will not be eligible. All gifts must be verified by the recipient institutions in order to be matched by MasterCard International.

For more information, please contact the Matching Gifts Program via phone at 877-698-5960, via email at mastercard@easymatch.com or visit the Matching Gifts Program website at www.easymatch.com/mastercard.



Matching Gifts Program Request Form

INSTRUCTIONS

DONOR:

- ◆ Complete Part 1 of this form – one for each gift. *Please print or type.* Send the form and a copy of the program guidelines, along with your donation, to the recipient organization.

RECIPIENT ORGANIZATION:

- ◆ Verify receipt of gift. Complete Part 2 of this form. *Please print or type.* Enclose a copy of your Internal Revenue Service 501(c)(3) tax status certificate, and a description of your organization's mission statement. Forward form to the address printed below.

PART 1 - DONOR SECTION

Donor Information:

EMPLOYEE ID NUMBER

EMPLOYEE NAME

HOME ADDRESS

CITY/STATE/ZIP

DAYTIME PHONE#

| | | | |
|--------------------------------------|-----------------------------------|---|--|
| \$ | | \$ | |
| AMOUNT OF GIFT (MIN \$25) | | AMOUNT OF MATCH REQUESTED (MIN \$25) | |
| <input type="checkbox"/> CREDIT CARD | <input type="checkbox"/> BY PHONE | DATE: _____ | |
| <input type="checkbox"/> CASH/CHECK | | | |

NAME OF INSTITUTION

CHAPTER NAME (IF ANY)

INSTITUTION CITY, STATE

RESTRICTION OR PURPOSE (IF ANY)

FOR DISASTER RELIEF (CHECK IF YES)

I certify that neither my family nor I will derive any direct or indirect financial or material benefit from this contribution. I certify that this contribution does not represent payment for tuition, services or other personal financial obligations. I have read and understood the guidelines of the MasterCard International Matching Gifts Program.

Employee Signature

Date

PART 2 - RECIPIENT SECTION

U.S. organizations must include a copy of your IRS 501(c)(3) determination letter and a description of your organization's mission statement; non-U.S. organizations must include certification of nonprofit status.

EMPLOYER IDENTIFICATION NUMBER (EIN)

ORGANIZATION NAME

ADDRESS

CITY/STATE/ZIP

TELEPHONE, INCLUDING AREA CODE

FAX, INCLUDING AREA CODE

E-MAIL AND WEBSITE ADDRESSES

| | | | |
|-----------------------|--|-----------------------------------|--|
| \$ | | \$ | |
| AMOUNT OF GIFT | | TAX DEDUCTIBLE GIFT AMOUNT | |

I certify that this organization/program meets the eligibility requirements of the MasterCard International Matching Gifts Program, and that neither the donor nor MasterCard International will derive any personal material benefit from this gift or match.

AUTHORIZED OFFICER'S NAME/TITLE (PLEASE PRINT)

SIGNATURE OF AUTHORIZED OFFICE

DATE

MAIL COMPLETED FORM AND ANY REQUIRED ENCLOSURES TO:

MasterCard International Matching Gifts Program
c/o The JK Group Inc.
P.O. Box 2195
Princeton, NJ 08543-2195
Phone: 877-698-5960
E-mail: mastercard@easymatch.com
www.easymatch.com/mastercard