

## 2008 EMPLOYEE MATCHING GIFT APPLICATION

National Instruments is proud to provide employees with the power of NI Gift Matching to make their one-time donations to qualified nonprofit organizations go further.

Please note that forms submitted and/or date by 12/31/2008 count toward your 2008 limit of \$1,000.00.

### *Step 1 – To Be Completed by NI Employee*

#### **Donor Information**

Employee Name:

Address:

City State, Zip:

#### **Gift Information**

Receiving Organization:

Address:

City State, Zip:

Total Amount of Gift:

**Requested Match Amount:**

**Date:**

### *Step 2 – To Be Completed By Recipient Organization*

The National Instruments employee named above is participating in the NI Gift Matching program. If your organization qualifies for this program, National Instruments will contribute to your organization according to our policy at the time of the gift. Section 170(f)(8) of the Internal Revenue Code requires that NI substantiate charitable contributions by a written acknowledgement from the donee organization. For more information on this NI program, visit

[www.ni.com/company/community](http://www.ni.com/company/community)

**Please complete the following information about this contribution and your organization and attach a copy of the IRS Letter of Determination indicating that your charity is a 501(c)3 organization or proof that your organization can receive charitable contributions for tax deduction purposes under section 501(c)3.**

1. Amount of contribution:

2. Were any goods or services provided by your organization in consideration for this contribution (e.g. food, beverages, tickets or entertainment at a fund raising event?) Yes:  No:

3. If yes, please describe the goods or services provided and give a good faith estimate of the value of the goods or services:

\_\_\_\_\_

4. This information is provided for the purpose of complying with IRS reporting requirements and is accurate to the best of my knowledge. I understand that penalties may be imposed by the IRS on charities that fail to make the required disclosure or for making disclosure that is inaccurate or incomplete.

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Organization Tax ID#: \_\_\_\_\_

Please return completed forms to:

National Instruments Matching Gift Processing  
C/O United eWay  
120 Wall Street, 4<sup>th</sup> Floor  
New York, NY 10005

For Questions, Please call: Brian Hamilton, (212)701-2650  
or [brian.hamilton@uwa.unitedway.org](mailto:brian.hamilton@uwa.unitedway.org)