## The Neiman Marcus Group, Inc. Matching Gift Program Request Guidelines

The Neiman Marcus Group (the Company) will match employee contributions meeting the criteria set forth below. Eligible individuals may contribute a minimum of \$25 up to a maximum of \$2,000 per qualifying organization in each calendar year. The Company will match each contribution on a two-for-one basis. Moreover, for any contribution made to a qualifying organization in which the eligible employee has an active involvement, (as evidenced by service on the organizations governing body or in one of its working committees) the basis of the Company's matching contribution may, upon application by the employee, accompanied by a description of the involvement and an estimate of the amount of time devoted to the organization, be increased to a level greater than two-for-one.

### Who Can Participate

You are eligible to participate in the Matching Gift program if you are a regular, active, non-union employee of the Company or any of its consolidated subsidiaries whose customary employment, excluding overtime work, is at least 30 hours per week with at least one year of continuous service.

## **Eligible Organizations**

Eligible organizations must be located in the United States or one of its possessions and 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. In addition, an eligible organization must fall into one of the following categories:

## **Educational Institutions:**

- (1) Four-year colleges and universities, graduate and professional schools, two-year junior and community colleges and public and private secondary schools which are accredited by a recognized accrediting agency or state department of education; for purposes of this program "secondary school" is defined as a school institution encompassing grades K-12 or 9-12;
- Alumni funds, foundations and associations connected with an (2) eligible institution providing the gift will be transmitted to the eligible institution for its use;
- (3) Recognized fundraising organizations representing educational institutions, such as the United Negro College Fund and the Independent College Fund of America.

## **Health Care Institutions:**

- (1) Not-for-profit hospitals which are short-term facilities (not extended care institutions) and accredited by the Joint Commission on Accreditation of Hospitals;
- Health care organizations and foundations, and welfare or other (2) service organizations, which are nationally recognized institutions and non-sectarian.

## Arts & Culture Organizations:

Non-profit art or cultural organizations, which are open to and operated for the benefit of the general public. Eligible organizations include (but are not limited to): orchestras, museums, libraries, theatres, botanical gardens, zoos, public television and public radio stations, performing art companies and historical villages and restorations.

## What Contributions are Eligible?

- Must be a personal gift from the donor's personal funds, which has been paid and not simply pledged, and must be made directly to the approved organization.
- The minimum gift eligible for matching is \$25. For gifts paid in installments, each installment must be submitted on a separate form and meet the \$25 minimum gift requirement.
- Gifts are matched on a two-for-one basis. For gifts to organizations in which the employee has an active involvement (as evidenced by service on the organizations governing body or in one of its working committees) the basis of the Company's matching contribution may be increased to a level greater than two-for-one. Proof of volunteer service must be provided in Part 1 of the Matching Gift Request Form.
- The donor's annual limit, for purposes of determining the Company match, is \$2,000 per qualifying organization in each calendar year. There is no annual limit on the number of qualifying organizations a donor may contribute to and request a match. If the donor makes several contributions, each will be matched in the order received, up to the maximum annual donor limit for the calendar year.
- The donor's limit is based on the date of the gift.
- Matching contributions from the Company will be designated for the same purpose as that designated by the employee-donor. special designation, the Company's gift will be unrestricted. Absent
- Gifts must be in the form of cash, check or marketable securities with a quoted market value. Gifts of securities are valued based on the average of the high and low on the date of the gift. No other form of personal or real property will be matched.

## What is Not Eligible for Matching?

- Gifts made by or through Community Trusts or similar organizations, including Charitable Remainder Trusts, Donor Advised Funds, or Family Foundations
- Gifts made in lieu of tuition payment for services
- Membership fees for which benefits are received
- Dues to alumni(ae) or similar groups
- The Company does not match gifts to churches, synagogues, or other institutions organized for the purpose of worship or religious study; nor does it match sponsorships of employees by other employees to benefit a charity (such as walk-a-thons, etc.)
- Gifts to religious organizations are not eligible, unless specified for a community outreach program, such as a soup kitchen or homeless shelter
- Subscription fees for publications
- . Insurance premiums
- Bequests or life income trust arrangements
- Gifts of real or personal property . Cumulative gifts from several individuals reported as one contribution

## How to Request a Match

Matching Gift requests can be submitted via the internet through an online web-based process or by paper.

## By Internet:

Matching Gift applications can be submitted electronically via a paperless process at <u>www.easymatch.com/nmg</u>. The web-based process is not only a faster and easier process, but you can also find program related information such as Guidelines, FAQs, Your Personal Giving History and Search for Charitable Organizations.

## By U.S. Mail:

- Part 1 Employee You can obtain a form by logging on to www.easymatch.com/nmg. Complete and sign Part 1 of the application form.
- Mail the originally signed application form, with the donation and any other necessary documentation, to the organization of your choice that meets the qualifying criteria.

### Part 2 - Recipient organization

The authorized officer of the receiving organization must verify the donation by completing Part 2 of the original application form (with the employee's original signature), sign it, and send it in.

## **Timetables & Deadlines**

Eligible requests are processed and matched to organizations on the following quarterly schedule.

Received By:	3/1	6/1	9/1	12/1
Processed By:	3/31	6/30	9/30	12/31

Match requests must be received within six months of the date of payment by cash, check, or traded securities. Gifts received after that time will not be honored. All gifts must be verified by the recipient organizations in order to be matched by the Company. For more information, please contact the Matching Gift Program via email at <u>NMG@easymatch.com</u> or by phone at 1-866-632-1415.

## Administrative Conditions

The Company reserves the right to determine whether a gift shall be matched; particularly where the Company contributes directly to an organization, for which a matching gift is sought, the fact of this support will be taken into account in determining whether or to what extent a gift shall be matched.

The Company may suspend, amend or terminate the program described herein at any time; prescribe, amend and rescind rules and regulations thereunder and make all other determinations deemed necessary or advisable for the administration of the program. The Company views participation in this program as completely voluntary. Employee lists will not be furnished to colleges.



## **Employee Instructions:**

Complete Part 1 of this form – one for each gift. *Please print or type.* Send the form with your original signature and a copy of the program guidelines with your contribution to the recipient organization.

## PART 1 - Employee Section

EMPLOYEE ID NUMBER				
DONOR NAME				
Home Address				
CITY/STATE/ZIP				
BUSINESS TELEPHONE, INCLUDI	NG AREA CODE			
E-MAIL ADDRESS				
Exact Date of Gift	¢			
<b>\$</b> Amount of Gift (min \$25)	\$ Amount to be Matched (min \$25)			
TYPE OF GIFT: PLEASE CHEC				
	CURITIES			
IF SECURITIES, NUMBER OF SH	ARES AND NAME OF SECURITY			
NAME OF ORGANIZATION				
ORGANIZATION CITY, STATE				
RESTRICTION OR PURPOSE (IF A				
ADDITIONAL INFORMATION ORGANIZATION ONLY:	I FOR VOLUNTEERISM IN THIS			
2. In addition to serving or	rganization's Board?  Yes  No n this organization's board, do you also nizations functions and services?			
DESCRIPTION OF YOUR INVOLVE	EMENT:			
ESTIMATED NUMBER OF HOURS	Annually:			
financial or material benefi	mily nor I will derive any direct or indirect t from this contribution. I authorize the anization to report this gift to The Neiman			

Marcus Group for the purpose of applying for a matching gift. I certify that my gift is a voluntary contribution, that it fully complies with the provisions of the program described herein, and does not represent in anyway a fee for a service or benefit. Any misrepresentation by me of the statements made herein will forfeit my rights to any matching contributions and, in addition, may result in violations of law. In addition, I certify that I have not been nor will be reimbursed by anyone for this contribution. I have read and understood the guidelines of The Neiman Marcus Group Matching Gift Program Program.

SIGNATURE OF EMPLOYEE

DATE

## **Recipient Organization Instructions:**

Verify receipt of gift. Complete Part 2 of this form. *Please print or type*. If this is your first matching gift request to The Neiman Marcus Group Matching Gift Program, please enclose a copy of your Internal Revenue Service 501(c)(3) determination letter and a brief description of your organization's primary mission statement or purpose. Forward form with original signatures to the address printed below.

PART	2 -	Recipient	Organization	Section
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OYER IDENTIFICATION NUMBER (EIN) NIZATION NAME FSS /STATE/ZIP PHONE, INCLUDING AREA CODE FAX, INCLUDING AREA CODE IL WEBSITE ADDRESS (IF ANY) GIFT RECEIVED \$ JNT OF GIFT TAX DEDUCTIBLE GIFT AMOUNT ITIONAL INFORMATION FOR VOLUNTEERISM FOR THIS

# LOYEE ONLY:

- bes the employee serve on your Organization's Board Yes 🖵 No
- bes the employee, as a member of your Organization's bard, volunteer time with the organization's function / 🖵 Yes 🖵 No ervice?

RIPTION OF VOLUNTEER WORK:

MATED NUMBER OF HOURS ANNUALLY:

eby certify:

- at this organization/program meets the eligibility quirements of The Neiman Marcus Group Matching Gift ogram
- at neither the donor nor The Neiman Marcus Group will
- hat neither the donor nor The Neiman Marcus Group will erive any personal material benefit from this gift or match hat this organization is in full compliance with the anti-rrorism laws legislated by the USA Patriot Act. In Idition, by countersigning this Matching Gift Application, I gree that this organization will not promote or engage in olence, terrorism, bigotry or the destruction of any state, or will it make sub-grants to any entity that engages in occordination. ese activities
- at I am authorized to attest to the above statements and ve sufficient knowledge to do so

DATE

ORIZED OFFICER'S NAME (PLEASE PRINT)

## TITLE (PLEASE PRINT)

SIGNATURE OF AUTHORIZED OFFICER

MAIL COMPLETED FORM AND ANY REQUIRED ENCLOSURES TO: The Neiman Marcus Group Matching Gift Program P.O. Box 3540 Princeton, NJ 08543-3540 Phone: 1-866-632-1415 E-mail: NMG@easymatch.com