## RLI Insurance Company Matching Gifts Program Certification of Matching Gift

Instructions: Individual completes Parts A and C and mails form with contribution. Organization completes Part B and mails to Community Foundation of Central Illinois, 331 Fulton, Suite 310, Peoria, IL 61602.

To: Name of Organization		
-		
Address	City, State, Zip	
Enclosed is my gift in the amount on matched by the company. To obta Foundation of Central Illinois.	of \$ I would like to have \$ in a matching gift, I authorize you to report my gift to the	of my gif Community
ndividual's Signature	Individual's Name (print or type)	
Iome Address	City, State, Zip Code	
	Part B - To be completed by Organization:	
prognization, contributions to whic	h are deductible under Section 501 (c) (3) of the Internal I	Revenue Code
•	h are deductible under Section 501 (c) (3) of the Internal I s a voluntary charitable contribution and does not repres	
Furthermore, I certify that this gift i a fee for merchandise or service.	s a voluntary charitable contribution and does not repres	
Furthermore, I certify that this gift i a fee for merchandise or service. Signature of Chief Financial Officer	s a voluntary charitable contribution and does not repres	
Furthermore, I certify that this gift i a fee for merchandise or service. Signature of Chief Financial Officer Please type or print Name of Officer	s a voluntary charitable contribution and does not represent Title Date Please return to the address listed above. Part C - To be completed by Individual:	
Furthermore, I certify that this gift i a fee for merchandise or service. Signature of Chief Financial Officer Please type or print Name of Officer	s a voluntary charitable contribution and does not represent to the address listed above.	
Furthermore, I certify that this gift i a fee for merchandise or service. Signature of Chief Financial Officer Please type or print Name of Officer	s a voluntary charitable contribution and does not represent Title Date Please return to the address listed above. Part C - To be completed by Individual:	
Furthermore, I certify that this gift i a fee for merchandise or service. Signature of Chief Financial Officer Please type or print Name of Officer	s a voluntary charitable contribution and does not represent Title Date Please return to the address listed above. Part C - To be completed by Individual: urance Company Matching Gifts Program	ent in any way
Furthermore, I certify that this gift i a fee for merchandise or service. Signature of Chief Financial Officer Please type or print Name of Officer RLI Insu	s a voluntary charitable contribution and does not represent to the address listed above.  Part C - To be completed by Individual:  urance Company Matching Gifts Program <u>Confirmation of Gift</u> Actual Date of Gift Amount of Gift	ent in any way
Furthermore, I certify that this gift i a fee for merchandise or service.	s a voluntary charitable contribution and does not represent Title Date Please return to the address listed above. Part C - To be completed by Individual: urance Company Matching Gifts Program <u>Confirmation of Gift</u>	ent in any way

when your gift is matched, this portion of the form will be returned to you in acknowledgment of your participation in the RLI Matching Gifts Program. Gifts will be matched until the fund is depleted. After this donation, the balance remaining in your Matching Gifts Account is \$\_\_\_\_\_.

## RLI Insurance Company Matching Gifts Program

RLI employees', officers' and directors' monetary contributions to a charitable or scholastic organization of their choice will be matched by RLI, subject to the following guidelines.

Requirements for Matching Gifts:

- 1. Individual contributions may range from a minimum of \$10 to maximum of \$2000.
- 2. An unlimited number of contributions will be eligible for a matching gift with an annual maximum of **\$2000** per individual.
- 3. Contributions are limited to the following types of organizations:
  - a. Charitable or cultural organizations which qualify as nonprofit though the IRS.
  - b. Educational institutions, such as accredited universities, accredited colleges, accredited junior colleges, and public or private elementary and secondary schools accredited by a nationally recognized agency or a state department of education.

No Matching Gifts contributions will be made to political or religious organizations whose services are limited to any one sectarian group. Contributions that involve any type of return to the individual, such as meals, subscription fees, tickets for benefits, fees for services, tuition payments, and real or personal property will not be matched.

Operation of the program:

- 1. When a contribution is made to an eligible organization, the top and bottom portions of the attached form should be completed (The form is located in the RLI Portal).
- 2. Submit the form along with your gift to the organization of your choice. The organization completes the balance of the form and returns it to the Community Foundation of Central Illinois.
- 3. The Community Foundation of Central Illinois will act as RLI's agent and disburse funds quarterly to the charitable organizations involved.

Any questions about the administration of the program or eligible organizations should be directed to the Charitable Contributions Committee: Helen Young, Chairman, Mark Bugaieski and Cindy Brassfield.