

## Tektronix Foundation Matching Gift Program Guidelines

### I. Eligible Donors

#### Active Employees:

All regular employees, eligible for benefits and directors of Tektronix, Inc. and its wholly-owned domestic subsidiaries are eligible for participation in the Tektronix Matching Gift Program

- Eligible gifts are matched dollar for dollar (100%) within established limits, while funds are available.

#### Retirees:

Employees who retired at age 55 or older or are receiving Tektronix retiree benefits.

- Eligible gifts are matched on a 1:2 basis (50%) within established limits, while funds are available

### II. Donation Limits

Tektronix Foundation will match up to \$2,000 per year per eligible donor which may be distributed among one or more qualified recipient organizations. The minimum level of gift to be matched is \$20.00.

- To be matched, a donation must be a personal gift, paid from the donor's personal funds, not simply pledged.
- Gifts may be cash, check or securities having a quoted market value. Securities will be matched on the basis of the average price on the date of the gift.

### III. Eligible Organizations

Eligible organizations must be in one of these categories: Arts/Culture, Education, Social/Human Services or Conservation. All organizations in these categories must be eligible to receive tax-deductible contributions under section 170(c) of the Federal Internal Revenue Code and must be classified as an instrumentality of a state or local government agency or as a public charity under section 501(c)(3) of the Code.

#### EDUCATION:

Gifts to any accredited educational institution will be matched by the Tektronix Foundation.

#### Colleges and Universities

- May be public or private
- Must be accredited and listed in the current HEP Directory.
- Must offer at least a two-year academic program.
- Funds must pass undiminished to the school.

#### Elementary and Secondary Education (K-12)

- Public or accredited private or approved charter school kindergarten through high school.
- Foundations established by the school districts to fund one or more eligible schools.

#### ARTS/CULTURE

- Must be open to and operated for the benefits of the general public. Eligible organizations include art, science, and historical museums; libraries, orchestras, opera, theater and dance companies; and public broadcasting organizations.

#### SOCIAL/HUMAN SERVICES:

Eligible organizations include youth and family services, drug and alcohol abuse prevention, food distribution, health care, care for the elderly, day care/pre-K education, disabled care organizations, Special Olympics, and Fire/Rescue organizations.

#### CONSERVATION:

Tektronix Foundation will match conservation donations to IRC 501(c)(3) qualified organizations.

### IV. Gifts Which Cannot Be Matched

- Social/Human Service Organizations, except as noted above.
- Gifts to support athletics, athletic scholarships, booster clubs, national or local alumni groups, Parent Teacher Associations (PTA, PFA, PTO), etc.), funding organizations such as the United Negro Fund, etc.
- Gifts in kind (e.g. real property other than securities, personal services).
- Financial obligations of the donor, including tuition, dues, fees, memberships, etc.
- Gifts where the donor, donor's family, or individuals the donor selects receive a benefit such as tickets, memberships, tuition, meals, or preference for parking, etc.
- Religious obligations such as the Bishop's or Cardinal's Appeal, tithes, etc.

### V. Procedure

- The Donor completes Section A of the form and forwards the form and their donation to the organization.
- The Organization's authorized representative completes Section B of the form and forwards it to the address shown below.
- Original (not copied) signatures are required from both the Donor and the Organization.
- If this is the organization's initial request, a mission statement and proof of tax status must accompany the request.

### VI. General Information

- Questions of policy, interpretation, application or administration of the Matching Gifts Program, or otherwise, shall be decided by the Tektronix Foundation, and its decision shall be final.
- Payments are made quarterly in April, July, October, and January for eligible requests received by the 15<sup>th</sup> of the preceding month. Forms that are received too late for the deadline are carried into the next quarter.
- The Foundation may suspend matches through the Program if the budget is depleted. A notice will be sent to eligible donors.
- Matching gift funding levels are determined each year by the Tektronix Foundation. When matching gift annual funds have been depleted, matching gift requests cannot be satisfied.

#### **Organizations please return the forms to us at:**

**Tektronix Foundation**  
Matching Gift Program  
P.O. Box 8498  
Princeton, NJ 08543-8498

#### **To contact us:**

(888) 835-0545  
  
(609) 799-8019  
[tekfndn@easymatch.com](mailto:tekfndn@easymatch.com)  
9-5 Eastern Time  
(24 hour voice mail)  
facsimile  
electronic mail

# Tektronix Foundation Matching Gift Program

## Matching Gift Application – Form A

To be completed by donor and sent with gift to selected organization or institution.

**(Please Print)**

Employee Name \_\_\_\_\_ Payroll Code \_\_\_\_\_ Active \_\_\_\_\_  
 Director \_\_\_\_\_ Retiree \_\_\_\_\_  
 Employee Status \_\_\_\_\_

Mailing Address, City, State and Zip \_\_\_\_\_ Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

Recipient Organization Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Purpose or gift designation (if any) \_\_\_\_\_ Date of Gift \_\_\_\_\_ \$ \_\_\_\_\_ . 00  
 Amount of Gift

Cash or Check \_\_\_\_\_ Security \_\_\_\_\_ Number of Shares \_\_\_\_\_ Name of Security \_\_\_\_\_

By signing and providing this matching gift form to the recipient organization I certify that the amount is a gift for which I receive no personal material benefit and that the gift meets the program guidelines listed on the reverse side of this form. The gift comes from my personal assets and will not entitle me, my family, or persons designated by me to any benefits including, without limitation, tuition, fees, dues, insurance premiums, athletic or other tickets, or other considerations or to fulfill a pledge, tithe or other church-related financial obligation.

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

## Matching Gift Application – Form B

To be completed by recipient organization and mailed to  
 Tektronix Foundation Matching Gift Program, P. O. Box 8498, Princeton, New Jersey 08543-8498

**(Please Print)**

Name of Recipient Organization \_\_\_\_\_ EIN (Employer Identification Number) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ Electronic Mail Address \_\_\_\_\_

\$ \_\_\_\_\_ . 00  
 Amount of Gift

\$ \_\_\_\_\_ . 00  
 Tax Deductible Amount of Gift

By signing and presenting this application I hereby certify that this organization/program meets the eligibility requirements of the Tektronix Foundation Matching Gift Program as outlined in the program guidelines. I further certify that the organization is eligible to receive tax deductible contributions under section 170(c) of the Internal Revenue Code and is classified as a 501(c)(3) public charity or a government agency and that the amount reported as the *Tax Deductible Amount of Gift* is a charitable contribution and that no personal benefit has been derived by the donor as a result of this gift.

Authorized Officer's Name (Please Print) \_\_\_\_\_ Title (Please Print) \_\_\_\_\_

Authorized Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Forms for donations made in the previous year will not be matched if received by Tektronix Foundation after March 1.**