MATCHING GIFT PROGRAM GUIDELINES

To encourage and support a culture of generosity and community involvement, The Coleman Foundation offers the Matching Gift Program, which provides matching funds to the charitable organizations employees and directors personally support. To maximize the impact of our team member’s charitable giving, Coleman matches donations made by eligible donors, at a 1:1, 2:1 or 3:1 ratio, up to $50,000 total per calendar year, to the eligible nonprofit organizations of their choice.

Revised 5/14/2021

WHO CAN PARTICIPATE?
All active full-time and part-time benefit eligible employees of The Coleman Foundation. Members of Coleman’s Board of Directors are also eligible to participate. Donations must be made on or after the date the donor becomes an eligible employee or a member of the Board of Directors. Gifts made by family members (other than a spouse or domestic partner) are not eligible for this program.

ELIGIBLE ORGANIZATIONS
Eligible organizations must be located in the continental United States and be recognized by the Internal Revenue Service as tax-exempt and designated as a public charity under Section 501(c)(3) of the IRS Code and designated as: (i) a ‘Public Charity’ under either Section 509(a)(1) or Section 509(a)(2) of the IRS Code or (ii) or be an instrumentality of a federal, state or local government as provided by Section 170(c)(1) of the Code.

Eligible organizations include, but are not limited to colleges and universities, private and public elementary and secondary schools, civic, arts and culture, health and human service agencies, and environmental organizations.

Political parties, political organizations and lobbying groups are ineligible.

WHAT CONTRIBUTIONS ARE ELIGIBLE?
- Must be a personal gift, from the donor’s personal funds, which has been paid and not simply pledged. The minimum gift eligible for matching is $25. For gifts of installments, each installment must be submitted on a separate form and meet the $25 minimum gift requirement.
- The maximum amount matched per donor per calendar year is $50,000. If the donor makes several contributions, gifts will be matched in the order received, up to the maximum limit for the year.
- The Foundation match is limited to the portion of the donor’s gift that is tax deductible.
- Gifts must be personal contributions made directly to approved organizations.
- The donor’s limit is based on the date of the gift. Make sure your receipts are properly dated.
- Gifts must be in the form of cash, check, credit card, or marketable securities with a quoted market value. Gifts of securities will be matched with cash and are valued using the price at the close of the market on the day of the transfer of the securities.
- Matching gifts are independent of any other arrangements the donor may have with the charity and

WHAT IS NOT ELIGIBLE FOR MATCHING?
- Gifts made to, by or through Community Trusts or similar organizations, including Charitable Remainder Trusts, Donor Advised Funds, Family Foundations or Private Foundations
- Gifts that provide a direct or material benefit to the donor or donor’s family, such as:
  - Trips, tours, internships, tuition, event tickets, parking privileges, club dues, products & services, discounts on products & services
- Gifts that result in advertisements or other promotions of an individual donor’s business activities
- Any portion of a gift that is not tax deductible to the donor
- Gifts made in lieu of tuition payment or services
- Fees for service or tuition payments or books and student fees
- Membership fees for which benefits are received
- Dues to alumni(ae) or similar groups, including sororities and fraternities
- Gifts or payments for primarily political purposes
- Subscription fees for publications
- Insurance premiums
- Bequests or life income trust arrangements
- Gifts of real estate, personal property or in-kind
- Cumulative gifts from several individuals reported as one contribution
- Gifts and/or designated monies that support athletics and/or sports teams except those with a youth development component that has an impact on grades K-12

HOW THE PROGRAM WORKS
Matching gift requests can be emailed to the CFO, ttrinley@colemanfoundation.org, or submitted by paper form.

By Mail:
The donor should:
- Complete Part 1 of the original application form.
- Mail or email the original application form, with the donation and any other necessary documentation, to the organization of your choice that meets the criteria listed in the guidelines.
- Please note that the matching gifts program is a benefit and responsibility lies with each donor to follow up on the matching gift (confirming the nonprofit organization verifies the donation and/or has received the matching gift).

The recipient organization should:
- Complete part 2 of the original application form.
- The authorized officer of the charity must verify the donation, sign the application form and return the original application form to The Coleman Foundation Matching Gift Program, 651 W. Washington Blvd, Suite 306, Chicago, IL 60661 or by email to the CFO at ttrinley@colemanfoundation.org.
Eligible requests are processed and matched to organizations within 30-60 days of receipt.

Match requests (complete with confirmation by the recipient organization) must be received by the Coleman Matching Gift Program within 6 months of the date of payment by cash, check, credit card, or traded securities. Requests received after that time will not be honored.

All gifts must be verified by the recipient organization to be matched by The Coleman Foundation.

For more information, please contact the CFO at 312.902.7120.
**MATCHING GIFT 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 with your contribution to the recipient organization.

**Recipient Organization:**
- Verify receipt of gift; Complete Part 2 of this form. *Please print or type.*
- Please enclose a copy of your 501(c)(3) IRS determination letter and a brief description of your organization’s primary mission statement or purpose.
- Forward form to the address printed below.

**PART 1 – DONOR SECTION**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
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<tbody>
<tr>
<td>Donor Name</td>
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<tr>
<td>Home Address</td>
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<tr>
<td>City/State/Zip</td>
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<tr>
<td>Business Telephone, including Area Code</td>
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<tr>
<td>E-Mail Address</td>
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<tr>
<td>Exact Date of Gift</td>
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<tr>
<td>Amount of Gift (Min $25)</td>
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<tr>
<td>Match Amount</td>
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<tr>
<td>Type of gift: Check/Credit Card</td>
<td>Check or Credit Card</td>
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<tr>
<td>Name of Recipient Organization</td>
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<tr>
<td>Organization City, State</td>
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<td>Restriction or Purpose (if any)</td>
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I certify that neither my family nor I will derive any direct financial or material benefit from this contribution. I authorize the above-named recipient organization to report this gift to The Coleman Foundation for the purpose of applying for a matching gift. I certify that my gift is a voluntary contribution, that it fully complies with the program described herein, and does not represent in any way 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 Coleman Foundation Matching Gift Program.

**PART 2 – RECIPIENT ORGANIZATION SECTION**

<table>
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<tr>
<th>Field</th>
<th>Information</th>
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<tbody>
<tr>
<td>Employer Identification Number (EIN)</td>
<td></td>
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<tr>
<td>Organization Name</td>
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<tr>
<td>Address</td>
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<tr>
<td>City/State/Zip</td>
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<td>Telephone, including Area Code</td>
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<tr>
<td>E-Mail Address</td>
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<tr>
<td>Website Addresses (if any)</td>
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<tr>
<td>Date Gift Received</td>
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<tr>
<td>Amount of Gift (Min $25)</td>
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<tr>
<td>Tax Deductible Gift Amount</td>
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</table>

I hereby certify that this organization/program meets the eligibility requirements of The Coleman Foundation Matching Gift Program, and that neither the donor nor Coleman Foundation will derive any personal material benefit from this gift or match.

**Authorized Officer’s Name (Please print)**

**Title (Please print)**

**Signature of Authorized Officer**

**Date**

**EMAIL COMPLETED FORM & REQUIRED DOCUMENTATION to**

the CFO, ttrimley@colemanfoundation.org

Alternatively, paper forms can be submitted to:

The Coleman Foundation Matching Gift Program
651 W. Washington Boulevard, Suite #306
Chicago, IL 60661
Phone: 312.902.7120

www.Colemanfoundation.org