



The DeLong Co., Inc.

Employee Matching Gifts Program Guidelines

The DeLong Co., Inc. and its subsidiaries offer the Employee Matching Gifts Program, which provides matching funds to the charitable organizations employees personally support. This program is offered with the purpose of encouraging voluntary support of charitable organizations, and allows employees to help direct corporate contributions to the eligible nonprofit organization(s) of their choice.

Matching Gifts Program

Each fiscal year, The DeLong Co., Inc. and its subsidiaries will match up to \$500 of an eligible employee's personal contributions that meet the program guidelines. The match ratio is \$1 for every \$1 contributed by the participant. Each gift must be a minimum of \$25.

Eligible Participants

Eligible participants must be active, full-time employees of The DeLong Co., Inc. or its subsidiaries. Members of The DeLong Co., Inc. shareholders and board of directors are also eligible to participate. Gifts from spouses or surviving spouses are not eligible.

Eligible Organizations

Eligible organizations must be located in the U.S. or one of its territories 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 or as an instrumentality of a federal, state or local government as provided by 170(c)(1) of the Code. Eligible organizations must be listed in the IRS Cumulative Index. These include but are not limited to the categories of: colleges, universities, private and public secondary and elementary schools, civic, culture and arts, health and human service, and environmental organizations or their foundations.

Eligibility Requirements

- Must be a personal gift, from a donor's personal funds, which has been paid and not simply pledged. Gifts must be made directly to approved organizations.
- The minimum gift eligible for matching is \$25. The maximum amount matched per donor per fiscal year is \$500. If a donor makes several contributions, gifts will be matched in the order they are received, up to the maximum limit in that fiscal year.
- The company match is limited to the portion of the donor's gift that is tax deductible. The value of gifts, goods or services that a donor receives in exchange for their donation, is not tax deductible and is not eligible for matching.
- Gifts must be in the form of cash, check or credit card. No other form of personal or real property donation will be matched.
- You may be asked to provide proof of contribution in the form of cancelled check or credit card statement.
- *Determination of an organization's initial and continued eligibility will be at the sole discretion of The DeLong Co., Inc.*

What is Not Eligible for Matching

- Gifts for extra-curricular activities, including sports, band, travel, field trip, sports groups.
- Gifts that provide a direct financial or material benefit to the donor or the donor's family.
- Membership fees for which benefits are received.
- Gifts made in lieu of tuition or services; fees for services.
- Gifts or payments to primary political or religious purposes, unless specified for community outreach programs, such as soup kitchen, food pantry or homeless shelter.

What is Not Eligible for Matching (continued)

- Dues to alumni groups or similar groups.
- Insurance premiums or gifts of real estate or other personal property.
- Bequests or life income trust arrangements.
- Any organizations which promote or engage in violence, terrorism, bigotry or the destruction of any state.
- Cumulative gifts from several individuals reported as one contribution.
- *Determination of an organization's initial and continued eligibility will be at the sole discretion of The DeLong Co., Inc.*

How Does the Program Work

Matching gift requests can be submitted by mail. Following receipt of request, The DeLong Co., Inc. will verify receipt of the donation.

Donor should:

1. Complete Part 1 of the application form.
2. Mail completed form and other necessary documentation to the eligible organization of your choice.

Recipient organization should:

1. Complete Part 2 of the application form.
2. The form must be signed by an authorized officer of the organization.
3. Mail the completed form to:
The DeLong Co., Inc. Matching Gifts Program
PO Box 552, Clinton, WI 53525.

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

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

Matching gifts must be requested within one year of the gift date. Requests received after this time will not be honored. Receipt of gift must be verified by the organization.

Organizations approved in the past may not qualify for matching gifts in subsequent years if new information is received regarding loss of their tax status or change in their mission or their programs that indicate the organization now falls outside The DeLong Co., Inc. Employee Matching Gifts Program guidelines. The participant's signature and the organization's signature on the form certify that the requirements have been met. The DeLong Co., Inc. will make all final determinations as to the eligibility of participants, gifts and recipient organizations and if matching funds will be gifted. The DeLong Co., Inc. Employee Matching Gifts Program is subject to change or may terminate at any time as determined by The DeLong Co., Inc.

If you have any questions, please contact us by email at pr@delongcompany.com or call 608.676.2255 ext. 1205.



The DeLong Co., Inc.

Employee Matching Gifts Program Form

Part 1 - Participant Section

Note: Participants must be active, full-time employees of The DeLong Co., Inc. or its subsidiaries, or members of the The DeLong Co., Inc. shareholders or board of directors.

Instructions: To be completed by Participant. Complete Part 1 of this form—one for each gift. Please print or type. Send the form and copy of the program guidelines with your gift to the recipient organization.

Donor Name

Home Address

City/State/Zip

Telephone, including area code

Exact Date of Gift

\$ _____ \$ _____
Amount of Gift (min \$25) Amount to be Matched (max \$500)

Name of Organization

Organization City, State

Restriction or Specific Purpose (if not specified, will be matched unrestricted)

I hereby certify that:

- ☐ The information submitted is correct and that my gift complies with all the provisions of the Program.
- ☐ The amount contributed does not arise from any past, present or future obligation to pay tuition, student fees or alumni fees.
- ☐ Neither my family nor I will derive any direct or indirect financial or material contribution from this contribution.
- ☐ I authorize the above-named recipient organization to report this gift to The DeLong Co., Inc. for the purpose of applying for a matching gift and that this gift will be used only in the U.S.
- ☐ My gift is a voluntary contribution and it fully complies with the provisions of 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.
- ☐ I have not been nor will be reimbursed by any person or organization for this contribution.
- ☐ I have read and understood the guidelines of The DeLong Co., Inc. Matching Charitable Gifts Program.

Signature of Participant _____ Date _____
Failure to complete entire form will delay or prohibit processing.

Email pr@delongcompany.com with questions.
Submit requests to The DeLong Co., Inc. within one year of gift date.
Schedule for Matching Gifts Approval and Check Processing:
Received by: 3/1 6/1 9/1 12/1
Processed by: 3/31 6/30 9/30 12/31

Part 2- Organization Section

Instructions: To be completed by Organization. Please verify receipt of gift. Complete Part 2 of this form. Please print or type. If this is your first matching gift request to The DeLong Co., Inc. Employee Matching Gifts Program, please enclose a copy of your IRS 501 (c)(3) IRD determination letter and a brief description of your organization's primary mission statement or purpose. Forward form to the address printed below.

This gift is subject to such conditions as may be determined, or altered, by The DeLong Co., Inc. Final determination of an organization's initial and continuing eligibility will be made by The DeLong Co., Inc.

Employer Identification Number (EIN)

Organization Name

Address

City/State/Zip

Telephone, including area code

Email

Organization Website (if any)

Date Gift Received

\$ _____ \$ _____
Amount of Gift (minimum \$25) Tax Deductible Amount

I hereby certify that:

- ☐ This organization/program meets the eligibility requirements of The DeLong Co., Inc. Employee Matching Gifts Program.
- ☐ That neither the donor nor The DeLong Co., Inc. will derive any personal financial or material benefit from this gift or match.
- ☐ That this organization is in full compliance with the anti-terrorism laws legislated by the USA Patriot Act. In addition, by countersigning this matching gifts form, I agree that this organization will not promote or engage in violence, terrorism, bigotry or the destruction of any state, nor will it make sub-grants to any entity that engages in these activities.
- ☐ That I am authorized to attest to the above statements on behalf of the receiving organization.
- ☐ I have read and understood the guidelines of The DeLong Co., Inc. Employee Matching Gifts Program.

Authorized Officer's Name (please print)

Title (please print)

Signature of Authorized Officer _____ Date _____

Mail Completed Form and Required Enclosures to:
The DeLong Co., Inc.
Attn: Matching Gifts Program
PO Box 552
Clinton, WI 53525