



ITW Foundation 3-for-1 Matching Gift Program U.S. Program Eligibility Guidelines and Instructions

ALL TERMS AND CONDITIONS FOR
THE ITW FOUNDATION 3-FOR-1
MATCHING GIFT PROGRAM ARE
EFFECTIVE **JANUARY 1, 2016**

Eligibility:

It only takes \$25 to get started in the Matching Gift program, which is open to benefits-eligible U.S. full-time, active ITW employees.

Organizations that can prove a U.S. Internal Revenue Code Section 501(c)(3) non-profit public charity status will qualify for matching contributions if the organization conducts cultural, civic, youth, minority, animal welfare, environmental, educational or senior activities or serves the health and social needs of the community. In addition, U.S. accredited public and private colleges and universities, and public and private elementary and secondary schools will qualify, if the contribution is donated to the school for educational purposes; however tuition, fees or other payments for things of value to the employee are not eligible. Generally, contributions must benefit the broader community rather than a small group or individual, so contributions to a specific Boy Scout or Girl Scout troop would not be eligible for match, but donations to the Boy Scouts or Girl Scouts of America or their regional councils would be eligible.

United Way donations through the matching gift program are not matched.

Excluded from the ITW 3-for-1 Matching Gift Program are contributions for:

- Subscriptions, fees, dues, memberships, tickets, tuition, in-kind contributions, silent auctions, raffle tickets and "payment for services rendered";
- Groups that promote a political party or candidate, or that advocate a particular position on specific areas of public policy;
- Fraternities and sororities;
- Educational institutions that are seminaries, defined as those that prepare individuals to support a religious faith (such as clerics, ministers, priests, rabbis, reverends, etc.);
- PTA's/parent-teacher organizations and booster clubs;
- Small groups, such as a specific Boy Scout or Girl Scout troop (but not regional councils or the national Boy Scout or Girl Scout organization), or funds set up to benefit specific individuals;
- Extra-curricular activities such as sports, bands, travel, field trips, etc., of private and public elementary schools, high schools and higher-education institutions;
- Missions, places of worship and other institutions that support a religious faith. However, if contributions are used only to promote health and human services such as feeding the hungry, providing shelter, offering clothing, or promoting self-sufficiency and these services are available to the general public, they are eligible for a match;
- Alumni associations;
- Athletic/sports groups;
- Organizations that are or operate like a Community Foundation or Federated Campaign; and
- Donor advised funds and private foundations (except private operating foundations).

Donor Instructions:

- Complete Part 1 of the application form and provide it to the recipient organization. The organization must complete the form and submit it to the ITW Foundation in order to receive the Matching Gift. See the Recipient Organization Instructions below.

Recipient Organization Instructions:

- Review the Recipient Organization Instructions and verify receipt of gift.
- Complete Part 2 of this form. *Please print legibly or type.*
- If this is your first matching gift request to the ITW Foundation 3-for-1 Matching Gift Program, please enclose a copy of your U.S. Internal Revenue Code Section 501 (c)(3) determination letter showing your status as a non-profit public charity or proof of accreditation as an educational organization and a brief description of your organization's primary mission statement or purpose.
- Return completed form to: ITW Foundation Matching Gift Program, 155 Harlem Avenue, Glenview, IL 60025.
- The Matching Gift Program is not to be construed as creating a balance due from, or a legal obligation of, the ITW Foundation or Illinois Tool Works Inc. The ITW Foundation reserves the right to change or withdraw the Matching Gift Program or any portion thereof without notice at any time and to decide any question of interpretation. If any matching gift is found at any time to have been generated by or for an ineligible person, donation or organization, the ITW Foundation reserves the right to request return of the funds.



ITW Foundation 3-for-1 Matching Gift Program U.S. Application Form

PART 1 – DONOR SECTION

EMPLOYEE NAME

HOME ADDRESS

CITY STATE ZIP CODE

BUSINESS TELEPHONE, INCLUDING AREA CODE

E-MAIL ADDRESS

GIFT AMOUNT (MIN OF \$25, MAX OF \$5,000) & DATE OF GIFT

GIFT AMOUNT TO BE MATCHED 3X BY THE FOUNDATION

NAME OF ORGANIZATION

ADDRESS

CITY STATE ZIP CODE

RESTRICTION OR PURPOSE (IF ANY)

I certify that neither my family nor I will derive any direct or indirect financial or material benefit from this contribution. I authorize the above recipient organization to report this gift to the ITW Foundation in order to apply for a matching gift. I certify that my gift is a voluntary contribution of my own funds and not a collection of funds from other individuals, that it fully complies with the provisions of the program and is not in any way a fee for a service or benefit. In addition, I certify that I have not been nor will I be reimbursed by anyone for this contribution. I have read and understand the guidelines of the ITW Foundation 3-for-1 Matching Gift Program and the consequences of violating these guidelines and/or the requirements stated above. **Any misrepresentation by me of the statements made herein will forfeit my rights to any matching contributions and may result in violations of law and possible termination of employment.**

EMPLOYEE SIGNATURE & DATE

This application must be completed and received by the Foundation or postmarked by March 31st in order to be validated and qualify for the previous calendar year.

PART 2 – RECIPIENT ORGANIZATION SECTION

ORGANIZATION NAME

ADDRESS

CITY STATE ZIP CODE

TELEPHONE, INCLUDING AREA CODE

E-MAIL ADDRESS

DATE OF GIFT RECEIVED

AMOUNT OF GIFT (\$) TAX DEDUCTIBLE GIFT AMOUNT (\$)

PLEASE PROVIDE HOW FUNDS WILL BE USED BY YOUR ORGANIZATION

I hereby certify that this organization/program meets the eligibility requirements of the ITW Foundation 3-for-1 Matching Gift Program, and that neither the donor nor recipient organization will derive any personal material benefit from this gift or match. By signing below I am confirming that our 501(c)(3) status is still in effect and that we understand the Matching Gift Program does not create a balance due from, or a legal obligation of, the ITW Foundation or Illinois Tool Works Inc.

AUTHORIZED OFFICER'S NAME (PLEASE PRINT)

TITLE (PLEASE PRINT)

SIGNATURE OF AUTHORIZED OFFICER DATE

MAIL COMPLETED FORM AND ANY REQUIRED ENCLOSURES TO:

**ITW FOUNDATION 3-FOR-1 MATCHING GIFT PROGRAM
155 HARLEM AVENUE, GLENVIEW, IL 60025**

IF YOU HAVE QUESTIONS EMAIL US AT: matchinggifts@itw.com
EMPLOYEES CALL: 1.866.ITW.2468; Option 6
CHARITABLE ORGANIZATIONS CONTACT US AT: 1.847. 657.6400

ITW Foundation 3-for-1 Matching Gift Program

Addendum for Matching Gifts for Scholarship Grant Purposes

In the event that a donor participant in the ITW Foundation Matching Gift Program requests that a matching gift be made with the intention that it be used for scholarship grant purposes, both the matching donor and the receiving organization must complete the following and submit to the ITW Foundation.

TO BE COMPLETED BY THE DONOR REQUESTING THE MATCHING GIFT: The undersigned matching donor hereby represents to the ITW Foundation that:

1. I made a donation of \$ _____ to _____ (“Donee”), which has been paid in full.
2. The donation described in 1 above was a charitable gift and was not made pursuant to any legal obligation.
3. I have not had any discussions or communications of any kind with the Donee regarding the selection of any particular scholarship recipient, and there is no agreement or understanding whereby I have influenced, or may in the future influence, the selection of any individual scholarship recipient.
4. Neither the undersigned nor any of my immediate family members is currently applying for a scholarship from the Donee and neither of us intends to apply for such a scholarship within the next 3 years.
5. The Donee will exercise complete control over the selection process and make the selection of scholarship recipients completely independent from the undersigned.

(Signature of matching donor)

(Print Name)

TO BE COMPLETED BY THE ORGANIZATION RECEIVING THE MATCHING GIFT (THE “DONEE”): The Donee hereby represents to the ITW Foundation that:

1. There has been no “earmarking” of the funds by the ITW Foundation, the matching donor or any other person related to or affiliated with the foregoing (“ITW Person”) for any named individual.
2. There is no agreement or understanding whereby an ITW Person may influence the selection of the individual scholarship recipient, and all scholarship decisions are made by the Donee with no input from the ITW Foundation.
3. The Donee is a public charity as defined by the Internal Revenue Code.
4. The Donee will exercise complete control over the selection process and make the selection of scholarship recipients completely independent from any ITW Person.
5. The Donee has an objective and non-discriminatory program for awarding scholarships.
6. The matching gift from the ITW Foundation, together with all such gifts within the last 12 months, is not material in relation to the scholarship fund’s total assets as of the date of this statement.

(Name of Organization Receiving the Matching Gift)

(Signature of Duly Authorized Agent)

(Print Name)