

## **Wellmark Foundation BluesCare Giving<sup>SM</sup>**

### **Employee Matching Gifts program**

For a gift to be matched, employees must complete Part 1 and send it to the non-profit organization to which they contributed. The non-profit organization must complete Part 2 and return it to the Wellmark Foundation or the employee.

Once the completed form is received, The Wellmark Foundation will send a matching gift check directly to the non-profit organization one month following the end of the business quarter. It is the employee's responsibility to submit this form to the non-profit organization.

### **Part 1 - Wellmark Employee Information**

To be completed by the employee. Add your signature and date, then forward to the non-profit organization to complete Part 2.

Donor:

Donor mailing address:

Donor email address

I have made a personal charitable contribution in the amount of \_\_\_\_ (cash, check, credit card, donor advised fund distribution, or stock value) to: \_\_\_\_\_

Donor Comments:

Donor Signature:

Date:

### **Part 2 – Gift Verification**

To be Completed by:

### **Name and complete address of the non-profit organization**

I certify that the above-indicated tax-deductible gift of (amount) has been received and will be used to support the primary objectives of this Non-profit organization.

I also certify that:

We are a tax-exempt organization as described in section 501(c)(3) of the U.S. Internal Revenue Code and are not classified as a private foundation or a non-functionally integrated type III supporting non-profit organization for federal income tax purposes.

We are physically located

We are an inclusive organization accepting of all aspects of diversity. Examples of diversity include race, color, age, sex, gender identity, gender expression, religion, national origin, ancestry, mental and physical abilities, and sexual orientation.

If a religious based organization, the funds will be used for secular initiatives only (e.g., community gardens, parent teacher organizations, food pantry, etc.) and not for initiatives requiring a profession of faith or promoting faith.

That neither the Wellmark Foundation nor the donor received any goods or services as defined in the relevant IRS rules and regulations.

No portion of the matching gift received from the Wellmark Foundation will be used by the organization to satisfy a legal obligation of the donor (e.g., a pledge that is enforceable under local law).

Signature:

Name:

Title:

Date: Return this form via email to: [BlueCaresGiving@Wellmark.com](mailto:BlueCaresGiving@Wellmark.com) via mail to: The Wellmark Foundation, Matching Gifts program, P.O. Box 9232, Des Moines, IA 50306-9232, or to the employee that you received it from if instructed.

Thank you for your time and attention to this request.