



**Part II** (to be completed by gift recipient organization if not pre-approved by Amundi US)

*Instructions:* The recipient qualifying organization completes Part II and returns the entire form via email to [US.CorporateCommunications@amundi.com](mailto:US.CorporateCommunications@amundi.com) or via mail to the address below:

Amundi US  
Attn: Community Relations  
60 State Street  
Boston, MA 02109

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone Number: \_\_\_\_\_

Does your organization have the following affiliations?

Religious	Yes	No
Political	Yes	No

Name of Certifier: \_\_\_\_\_

Title of Certifier: \_\_\_\_\_

As an authorized officer, I certify that this organization received the indicated gift and that this organization is a nonprofit organization, contributions to which are deductible under Section 501(c)(3) of the IRS Code. Furthermore, I certify that the gift is a voluntary charitable contribution and does not represent, in any way, a fee for tuition, dues, subscriptions, tickets, services or any other consideration. (To the extent that these items are for charitable purposes, Amundi US will match only the tax-deductible portion.)

Taxpayer ID/501(c)(3) Number: \_\_\_\_\_  
(Required for Amundi US accounting and reporting purposes)

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