

# BNSF Railway FOUNDATION

2500 Lou Menk Drive, AOB-2, Fort Worth, TX 76131-2830

## Employee Matching Grant Program

Part 1 - To be completed by employee, then forwarded with contribution to nonprofit organization.

Employee Name

Employee "B" Number (if not known, please contact your Human Resources representative.)

Full Home Address: No. & Street, City, State & Zip Code

Telephone Number

Division, Department & Location

Email Address (can be work or home)

Exact Date of Contribution (If listing more than one, provide the date of EACH INDIVIDUAL CONTRIBUTION.)

Amount of Contribution (If listing more than one, provide the amount of EACH INDIVIDUAL CONTRIBUTION, not a grand total.)

Do you or any member of your immediate family have a relationship or association with the charity receiving your contribution? If so, describe the nature of the relationship:

I certify that the information submitted is correct and represents my personal contribution under the provisions of the program:

Employee Signature (Must be original – copied or faxed signatures cannot be accepted.) Date

### Part 2 – Completed by Organization

Legal Name of Organization

Contact's Telephone Number

Name of Fund or Designation, If Any

Contact's Email

Address where Matching Grant payments are accepted.

Securities – Company Name, Type, Number of Shares, Value, and Method of Valuation

Attach a copy of the donor's payment or a receipt showing the exact amount and date of the contribution, as well as a copy of your 501(c)(3) determination letter if you have not previously supplied one. The determination letter should reference the Internal Revenue Code section under which your organization is exempt. Donations to the following may be matched: organizations recognized as exempt under I.R.C. Sections 509(a)(1) and 509(a)(2), and exempt operating foundations under I.R.C. Section 4940(d)(2). Failure to provide the necessary documentation will result in the form being returned to you, which will delay your receiving the BNSF Railway Foundation's match.

Please record whether the donor has received or will receive any benefit or service in exchange for the donor's contribution (for example: CD's, mugs, t-shirts, DVDs, magazine subscriptions, gifts, place at a gala dinner, or any other amenities that have cash value.) The signature of an Authorized Signer below certifies that (i) the donor has not and will not receive any benefit or service in exchange for a contribution by the BNSF Railway Foundation, (ii) no portion of a contribution by the BNSF Railway Foundation will be applied to any current or future pledge of the donor, and (iii) to the best of your knowledge, your organization is in compliance with the criteria for the BNSF Railway Foundation Employee Matching Grant Program (attached and available at <http://bnsffoundation.org/programs>).

Benefit received by employee: Cash Value:

Authorized Signature

(Did you remember to attach a receipt or copy of donor's payment?)

Date

Printed Name of Authorized Signer