

Our charitable mission is to improve the quality of life in the communities where we live and work by supporting organizations that address vital community needs and issues in the areas of human services, animal welfare, the arts, and the environment.

You Can Make a Difference

Our employees make an extraordinary impact by engaging with our communities! This is why the Deacon Charitable Foundation matches your generosity in one of two ways:

- Cash gifts of at least \$20 will be matched 2:1
- When you or a family member volunteers for two hours or more, we will match \$20 for each hour volunteered.

Eligible Employees

All full-time regular employees of Deacon Construction and their immediate families (spouses/domestic partners and children) may participate.

The combined total the Foundation will match is a maximum of \$1,000 per employee per calendar year for financial donations AND \$2,000 per employee per calendar year for donations of TIME to qualified* organizations.

How Do I Make a Matching Gift Donation?

(1) If you use a **personal check**, or would like your **volunteer hours** matched, the Foundation must have the signature of an authorized contact at the nonprofit to certify receipt of your gift. Please complete and submit the back of this form to the nonprofit within three months of the gift. The nonprofit charity will complete its part of the application and will send it to the Foundation.

(2) If you make your gift by **credit card**, just email your e-receipt to Julie Earnest – don't worry about the form. *Easiest for you, preferred by me!*

(3) The Foundation will confirm employee and organization eligibility, and will make a matching donation. You will receive a confirmation letter once the check has been mailed.

Eligible Organizations *

It is our goal to support you and your family in your efforts to support your community. We want our matching to be as all-inclusive as possible and we hope the requests will reflect a philosophy of *giving beyond yourself, rather than to yourself*. We encourage giving that is inclusive, nonpartisan, and based on addressing humanitarian needs.

For the employee matching grant program, a “qualified nonprofit*” is an organization that has an active 501c3 designation from the IRS. There are very few 501c3 charities that we might not support, and for more information about these or for other questions about eligibility, contact Julie Earnest or your local Giving Committee representative.

Questions? Ask us!

GIVING COMMITTEE CHAIRS

SEATTLE

Lindsey Allen, Allie Keleti, Lita Orinion

PORTLAND

Danae Walker, Caitlin Gustafson

SACRAMENTO & PLEASANTON

Kat Johnson, John Sarbacher, Rachel Diel

ORANGE COUNTY

Veronica Wences, Marisa Larson

EXECUTIVE DIRECTOR

Julie Earnest, PhD
Deacon Charitable Foundation
T: 503.297.8791

julie.earnest@deacon.com
www.deaconcharitablefoundation.org

* *The Employee Matching Gift Program is funded and administered by the Deacon Charitable Foundation and is subject to change at the discretion of the Board of Directors. The Foundation is committed to supporting organizations that serve the public at large, and we reserve the right to decline a request to match a donation to organizations known to have beliefs or practices that attack or malign an entire class of people, even if that group is a registered 501c3 nonprofit. Revised 11/26/19*



EMPLOYEE MATCHING GIFT & VOLUNTEER PROGRAM APPLICATION

PART 1: To be completed by EMPLOYEE / DONOR / VOLUNTEER. Please print.

EMPLOYEE INFORMATION

Employee Name _____

Email _____

Office: Seattle Portland
 Irvine Sacramento/Pleasanton

EMPLOYEE CERTIFICATION

I certify that the information I have provided is complete and correct, that my gift fully complies with the program provisions, and that this is not an unpaid pledge or payment for services, tuition, dues, tickets, or any other purpose than a contribution. I am not receiving any value in exchange for this gift.

Signature _____ Date _____

CHARITABLE ORGANIZATION

Recipient Organization Name _____

Type: Animal Welfare Children / Families
 Education Domestic Violence
 Hunger Housing / Homelessness
 Seniors Medical / Wellness
 Environment Veterans
 Other _____

MATCHING GIFT INFORMATION

Donor/Volunteer Name _____

Date of Gift _____

Tax-deductible Gift Amount _____

MATCHING TIME INFORMATION

Donor/Volunteer Name _____

Hours Volunteered _____ Date(s) of Service _____

Brief Description of Activities _____

PART 2: To be completed by CHARITABLE ORGANIZATION. Please print.

ORGANIZATION DETAILS

Federal I.D. No. (EIN) _____

Name and Title of Financial Officer _____

Address _____

City, State, Zip _____

Telephone _____ Ext. _____

Email _____

Website _____

Date of Gift _____

Gift Amount Received _____

Tax Deductible Amount _____

ORGANIZATION CERTIFICATION

I certify receipt of the gift and/or completion of the volunteer hours indicated above. The matching gift will be used to support the primary objectives of the organization, which is classified as a tax-exempt public charity under Section 501c3 of the Internal Revenue Code, and I further certify that 1) this is an eligible organization; 2) funds received from the Matching Gift & Volunteer Program will not be credited toward fulfillment of an unmet pledge; 3) neither the Deacon Charitable Foundation nor the employee received goods, services, or other *quid pro quo* as defined in the relevant IRS rules and regulations.

Signature of Financial Officer or Delegate _____ Date _____

Please return this form to:

Deacon Charitable Foundation
attn. Julie Earnest – Executive Director
901 NE Glisan Street, Suite 100
Portland, OR 97232-2730

or email scanned form to
julie.earnest@deacon.com

Questions?

Contact Julie Earnest at 503.297.8791

or email julie.earnest@deacon.com

Matching gift payments will be made quarterly.