



### Eligibility Requirements

#### Individual Donors

All regular, benefits-eligible employees, retired employees who are eligible for medical benefits, and retired outside directors are eligible to participate in the program. Gifts made jointly in the names of an eligible person by his or her spouse or partner are also valid.

#### Charitable Organizations

Nonprofit organizations, located in the U.S. or one of its possessions, recognized by the Internal Revenue Service as tax-exempt, and designated as a public charity under Section 501(c)(3) of the IRS Code or as an instrumentality of a federal, state or local government as provided by Section 170(c)(1) of the Code are eligible. Organizations must be nonsectarian, nonpolitical, and open to nondiscriminatory, public participation. The following types of organizations are eligible to receive matching gifts:

- ◇ **Education:** primary and secondary schools, two- and four-year colleges and universities, including technical, professional, and graduate schools.
- ◇ **Environment:** organizations that focus on preserving, protecting, and conserving the environment, natural resources, and wildlife.
- ◇ **Civic and Human Services:** organizations that focus on helping children and families, including youth centers and academic achievement programs.
- ◇ **Arts and Culture:** organizations that promote the understanding of the humanities, visual, and performing arts, including libraries and museums.
- ◇ **Medical:** health and medical institutions
- ◇ **Athletic:** competitive interscholastic or intercollegiate athletic programs and scholarships

#### Contributions

- ◇ The minimum gift eligible for matching is \$15. For gifts of installments, each installment must be submitted on a separate form and meet the \$15 minimum gift requirement.
- ◇ The maximum amount matched to a single organization, per calendar year, per employee is \$2,500. Gifts will be matched in the order received, up to \$25,000, the total annual amount per employee.
- ◇ Gifts must be from the donor's personal funds, which have been paid and not simply pledged, and must be made directly to the approved organization.
- ◇ Gifts must be in the form of check, credit card, or marketable securities with a quoted market value.
- ◇ Gifts of securities are valued based on the average of the high and low on the date of the gift. No other form of personal or real property will be matched.
- ◇ The donor's limit is based on the date of the gift.
- ◇ Donors are encouraged to restrict their gift to a specific purpose or project within the eligible organization.

### Program Instructions

**Eligible Individuals:** Complete **Part 1** of the application. Send entire form and donation to the charitable organization.

**Recipient Organization:** Complete **Part 2** of the application. Return entire form with an authorized officer's signature to:

Houghton Mifflin Matching Gift Program  
P.O. Box 2236  
Princeton, NJ 08543-2236

#### Important Deadlines

Eligible requests will only be considered if they are submitted during the calendar year in which the contribution is made. The Matching Gift Program **must** receive all authorized forms from organizations no later than January 31 of the following calendar year. Accounting inquiries from employees or organizations must be received no later than December 31 of the year after the contribution was made.

#### Payout Schedule

Gifts are matched on a quarterly basis.

**For more information, please contact customer service.**

Telephone: 877-624-4342

E-mail: [hmco@easymatch.com](mailto:hmco@easymatch.com)

Company Intranet: <http://intranet.hmco.com>

#### Not Eligible for Matching

- ◇ Support to an eligible program component of an ineligible organization
- ◇ Gifts made by or through Community Trusts or similar organizations, including Charitable Remainder Trusts, Donor Advised Funds, or Family Foundations
- ◇ Gifts of real or personal property
- ◇ Bequests or life income trust arrangements
- ◇ Insurance premiums
- ◇ Student, membership, and subscription fees
- ◇ Ticket purchases or event support
- ◇ Cumulative gifts from several individuals reported as one contribution
- ◇ Alumni, social, and professional group dues
- ◇ Sororities and fraternities
- ◇ Scholarship funds where the donor chooses the scholarship recipient
- ◇ Gifts made in lieu of tuition payment for services

#### Administrative Conditions

Houghton Mifflin reserves the right to interpret, apply, amend, or revoke these guidelines at any time without prior notice. Employees should confirm their organization's eligibility status prior to making their donation. Houghton Mifflin is under no obligation to honor multi-year pledges made by employees should program guidelines change. The policies and procedures described above are not conditions of employment nor are they intended to create or constitute a contract between Houghton Mifflin and any one or all of its employees.



Donor Instructions

- Complete Part 1 of this form. Please print or type.
Send application form, a copy of the program guidelines, and your contribution to the recipient organization.
Note: separate application forms are required for each gift. Forms that list multiple gifts will be returned.

Part 1 - Donor Section

Form fields for donor information: DONOR NAME, HOME ADDRESS, CITY/STATE/ZIP, BUSINESS TELEPHONE, E-MAIL ADDRESS, EXACT DATE OF GIFT, AMOUNT OF GIFT, Type of gift (please check one), IF SECURITIES, NAME OF ORGANIZATION, ORGANIZATION CITY, STATE, RESTRICTION OR PURPOSE, SIGNATURE OF EMPLOYEE, DATE.

Organization Instructions

- Verify receipt of gift.
Complete Part 2 of this form. Please print or type.
If this is your first matching gift request to the Houghton Mifflin Matching Gift Program, please enclose a copy of your Internal Revenue Service 501(c)(3) IRS determination letter and a brief description of your organization's primary mission statement or purpose.
Forward Part 1 and Part 2 to the address printed below.

Part 2 - Organization Section

Form fields for organization information: ORGANIZATION NAME, EMPLOYER IDENTIFICATION NUMBER, ADDRESS, CITY/STATE/ZIP, TELEPHONE, FAX, E-MAIL, WEBSITE ADDRESSES, DATE GIFT RECEIVED, AMOUNT OF GIFT, TAX DEDUCTIBLE GIFT AMOUNT, I hereby certify that: (bullet points), AUTHORIZED OFFICER'S NAME, TITLE, SIGNATURE OF AUTHORIZED OFFICER, DATE.

Mail completed form and any required documents to: Houghton Mifflin Matching Gift Program, P.O. Box 2236, Princeton, NJ 08543-2236