



MATCHING GIFT PROGRAM

Policy:

Contributions made by A+E Networks employees to certain U.S. charities will be matched by the Company at a rate of 50% of the amount of the employee contribution. The *minimum* employee contribution that the Company will match is \$100 per eligible institution (A+E Networks Matching Gift is \$50). The *total annual maximum* employee contribution that the Company will match is \$5,000 (AETN Matching Gift is \$2,500). A+E Networks Matching Gift contributions will not exceed \$2,500 per employee, per year. Gift requests for the prior year will only be processed when all required documents are received by January 31st of the current year.

Matching Gift funds may only be provided to educational, medical research, community development, social services, or cultural institutions organized and operating in the United States. Tax exempt status under Section 501(c)(3) of the Internal Revenue Code and a determination of publicly supported status from the Internal Revenue Service is required. The IRS letter of determination must be submitted by the institution to the Company along with a completed Matching Gift Program form. Social welfare organizations exempt from income tax under Section 501(c)(4) of the Internal Revenue Code (typically those who currently lobby or expect to do so) are ineligible to receive Matching Gifts.

This Matching Gift program is conducted at the discretion of the Company and the Company reserves the right to amend or terminate this program at any time without prior notice.

Procedure:

1. The employee must submit a Matching Gift Program form (attached) to the eligible public charity with his or her donation.
2. The Matching Gift Program form is to be completed by the eligible public charity and forwarded *by the charity* directly to the A+E Networks Benefits Administrator.
3. Upon receipt of the completed Matching Gift Program form and required documentation, the A+E Networks Benefits Administrator will direct payment of Matching Gift contributions to the public charity.



Matching Gift Form

(Please print)

To Be Completed by AETN Employee	
Employee (Donor) Name	_____
Name of Charitable Organization	_____
Organization Address	_____ _____

I acknowledge that this request for matching funds does not exceed the \$2,500 maximum annual matching contribution limit per employee. Gift requests for the prior year will only be processed when all required documents are received by January 31st of the current year.

Employee Signature

Date

To Be Completed by Recipient Organization	
Contribution: \$ _____	Date _____
(Minimum employee contribution \$100)	
Please return the following documents to the address below:	
<input type="checkbox"/>	Completed Matching Gift Form
<input type="checkbox"/>	Proof of 501(c)(3) public charity status (i.e., "not a private foundation"). (A+E Networks Matching Gift contributions will not be processed without proof of public charity status.)
<input type="checkbox"/>	Receipt for Donation
Make matching contribution check payable to: _____	
(Include full name and address of institution)	
Mail to:	Benefits Administrator Human Resources A+E Television Networks 235 E 45th Street New York, NY 10017
For A+E Networks Office Use Only	
50% Matching Contribution amount:	\$ _____
	(\$50 minimum/\$2,500 maximum per employee per year)
Approval _____	Date _____