

THANK YOU FOR YOUR PLEDGE TO OUR COMMUNITY.

Step 1: Provide your contact information

Please print firmly in all CAPITAL LETTERS

Mr/Mrs/Ms First Name MI Last Name Suffix
 Personal Email Address
 Home Address City State ZIP
 Daytime Phone Mobile Phone Male/Female Birth Date (MM/DD/YY)
 Employer Employee ID Number (optional)

- I have been contributing to United Way for _____ years.
- I am interested in learning more about Women United.
- I am interested in learning more about the Young Philanthropists (for young professionals under the age of 40).
- I am interested in volunteer opportunities
- I would like to know how to include United Way in my will or estate plan.

Step 2: Choose how you would like to make your pledge

Easy Payroll Contributions AMOUNT \$ per pay period for a TOTAL annual gift of AMOUNT \$ PER YEAR
 Pay period is: weekly (52) every other week (26) twice a month (24) once a month (12) other _____

One Time Direct Gift AMOUNT \$

Direct gift to be paid by:

- Personal Check.** Enclosed and made payable to United Way of the National Capital Area (preferred option).
- Securities.** Please call (202) 488-2000 when you are ready to transfer funds.
- Credit Card.** To make a contribution by credit card, please visit our website at UnitedWayNCA.org.

Step 3: Direct your pledge

OPTION A

Give Directly to United Way NCA (8000)
 Become a game-changer and join the equity movement for the most vulnerable in our community.
 AMOUNT \$ PER YEAR

OPTION B

Give Where You Live
 Your contribution will go to support programs and initiatives in the county or city where you live.

- Alexandria (9001)
- Arlington (9002)
- District of Columbia (9003)
- Fairfax-Falls Church (9004)
- Loudoun (9005)
- Montgomery (9006)
- Prince George's (9007)
- Prince William (9008)
- National Capital Area (9000)

AMOUNT \$ PER YEAR

or

OPTION C

Give to the Community Impact Fund
 Your contribution will help to solve our region's most critical issues.



- Education Fund** (9072)
 Providing academic supports, mentoring and behavioral health services for middle school student success.



- Health Fund** (9074)
 Promoting health and wellness and providing basic needs throughout our community.



- Economic Opportunity Fund** (9073)
 Improving the economic opportunity of low-income families, helping them to avoid homelessness and access affordable housing.



- Veterans Fund** (9080)
 Helping veterans access educational and employment services and basic needs support.

AMOUNT \$ PER YEAR

Step 4: Sign here to authorize your pledge and confirm payment

I agree that if my designation is to an organization that is not an IRS-recognized 501(c)(3), is not in compliance with the United States Patriot Act, or if for any reason my donation is unclaimed by the designated organization, my donation will be directed to the United Way NCA general fund.

- Please check here if you prefer that your gift remain anonymous.

Date _____ Signature _____ Total Gift \$ _____

Important tax information: Gifts made to United Way NCA are tax deductible within the limits of current law. Please keep a copy of this pledge form along with your year-end pay stub for payroll contributions. It will serve as a record of your donation to meet IRS regulations. United Way respects your privacy. We do not rent, trade or sell lists of donors. Additionally, no compensation, goods or services have been given to the donor in return for their contribution.



See back of this form to give to a nonprofit of your choice.

**WHEN NONE ARE IGNORED,
ALL WILL THRIVE.**

Direct your pledge (continued)

OPTION D

A minimum gift of \$25 per nonprofit is required for designations to specific United Way NCA partner nonprofit organizations.

United Way NCA Partner Nonprofit

Select up to two (2). For a complete list of nonprofit members, visit [UnitedWayNCA.org](https://www.unitedwaynca.org).

Partner Nonprofit Name

Designation Code

AMOUNT \$ _____ PER YEAR

Partner Nonprofit Name

Designation Code

AMOUNT \$ _____ PER YEAR

Non-Partner Organization

Select up to one (1). Organization must be a 501(c)(3). Please provide full address to ensure accurate processing.

Nonprofit Name

EIN#

Address

City

State

Zip

AMOUNT \$ _____ PER YEAR

A minimum gift of \$100 per nonprofit is required for non-partner nonprofits. If minimums are not met, gifts will be contributed to the United Way NCA general fund to address the most critical needs in the community.

