



MATCHING GIFTS PROGRAM REQUEST FORM

Section A — Donor

Please complete this section and send it, with your contribution, to the recipient organization. The recipient organization will complete Section B.

Name _____

Employee Identification Number (found on your paystub) _____

Address _____ City/State/ZIP _____

Phone Number _____ Email Address _____

Select the type of gift(s) for which you are requesting Matching Gifts and complete the information in the corresponding box(es).

Volunteer Gifts (fill out this section ONLY if you are requesting Matching Gifts for volunteer hours worked)

Number of Hours Worked (Minimum of 10) _____ Dates Volunteer Hours Were Performed _____

Organization Name _____ City/State _____

Monetary Gifts (fill out this section ONLY if you are requesting Matching Gifts for monetary donation)

Date of Gift _____ Amount of Gift \$ _____

Type of Gift (check one) _____ Amount to Be Matched \$ _____

Cash/Check Credit Card Securities

• If Securities: Name of Security _____

Number of Shares _____ Recipient Organization Name _____

Date of Transfer _____ City/State _____

Certification Statement

I certify that the information I have provided is complete and correct to the best of my knowledge, and that my gift complies with the provisions of the program set forth on this form. I understand that only the tax-deductible portion of my donation is eligible for matching by The CarMax Foundation Matching Gifts Program.

Donor Signature _____ Date _____

Section B — Recipient Organization

Please complete the following information and send to:

The CarMax Foundation Matching Gifts Program

P.O. Box 8258

Princeton, NJ 08543 – 8258

(877) 698-5959

Federal Employer Identification Number _____ Organization Name _____

Mailing Address _____ City/State/ZIP _____

Phone _____ Fax _____

Email Address _____ Website Address _____

Gift Amount _____ Tax Deductible Gift Amount _____

Certification Statement I hereby certify that: 1) the receipt of the gift described herein, 2) the eligibility of this organization, 3) and the use of these funds conform with The CarMax Foundation Matching Gift Program guidelines.

Name of Organization Representative _____ Title _____

Signature _____ Date _____

The CarMax Foundation reserves the right, at any time, to modify or discontinue this program. The interpretation, application, and administration of the provisions of this program shall be determined solely by The Foundation, and its decisions shall be final.

For more information, contact The CarMax Foundation Matching Gifts Program at: P.O. Box 8258 Princeton, NJ 08543-8258

Phone: (877) 698-5959

MATCHING GIFTS PROGRAM GUIDELINES

The CarMax Foundation Matching Gifts Program is an important part of CarMax's corporate giving. Through the program, CarMax matches up to \$5,000 per Associate per year. The program allows Associates to direct our corporate giving and strengthens the communities where we live and work. The program provides CarMax Associates an opportunity to help their favorite charities and organizations in two ways.

- The **Matching Dollars** program doubles the amount of money Associates donate to eligible charities. When you donate to a qualified charitable organization, CarMax will donate the same amount, dollar for dollar, up to the annual limit. There is a \$25 minimum and matches are eligible for up to 12 months from the date of your donation.
- The **Matching Hours** program provides a financial contribution for the donation of your time. For every hour you volunteer with a qualified charity, CarMax will donate \$10 to the charity. There is a 10-hour minimum per application and hours are eligible for up to twelve (12) months from the date of service to application date.

The program will match a maximum of \$5,000 per Associate each calendar year in any combination of volunteer hours or donations.

GUIDELINES

- The CarMax Foundation will match a maximum of \$5,000 per calendar year, per Associate in any combination of money or time.
- The minimum cash gift amount per match request is \$25.
- Associates must volunteer for a minimum of ten (10) hours per organization before submitting a match request (\$100 minimum).
- Associates can request up to ten (10) matches in one year.
- Maximums are calculated on a calendar year — contributions made in a calendar year will apply toward your matching gift maximum for that same year.
- Forms must be submitted and received for gift matching within twelve (12) months of the date of the financial contribution or volunteer time.
- Separate forms for each financial donation are required.
- Separate forms for each organization with which you volunteer are required, but you can collect volunteer hours for the calendar year or you can submit a match request as you wish, so long as you have enough hours [minimum of ten (10)].
- Financial contributions must be a personal, tax-deductible donation that has been paid and not simply pledged.
- All Associates are eligible to participate in The CarMax Foundation Matching Gifts Program after thirty (30) days of employment.
- Eligible organizations must be located within the United States and recognized by the IRS under Section 501(c)(3) of the U.S. Internal Revenue Code. Eligible organizations include, but are not limited to, colleges and universities, civic organizations, arts and culture organizations, health and human service agencies, and environmental organizations.

MATCHING GIFTS PROGRAM GUIDELINES

• **The following organizations are NOT eligible:**

- Religious organizations, unless the activities sponsored are non-sectarian, such as soup kitchens and shelters
- Private foundations, donor advised funds, charitable gift funds (except the CarMax Associate Disaster Relief Fund), or family funds
- Service clubs, social groups, fraternal and labor organizations, political organizations and lobbying groups, and business and industry associations
- Government agencies

• **The following gifts are NOT eligible:**

- Contributions that result in you or a family member receiving a benefit (e.g. auction items, dinners, raffles, sporting event tickets, sponsorships, golf tournaments, booster clubs, memberships, etc.)
- Pledges, tuition, or tithes to houses of worship (e.g. churches, synagogues, etc.)
- Contributions to religious programs or organizations whose principal purpose is propagating a particular religious faith, creed, or doctrine (e.g. missions, religious orders)
- Dues and subscription fees
- Grouped and pooled donations (including contributions made by groups of Associates or other persons and claimed as one gift from a single eligible donor)
- Deferred gifts (annuities, charitable remainder trusts, etc.), bequests, and insurance premiums that name the organization as a beneficiary
- Tuition fees, loan repayments, and payments in lieu of tuition
- Travel or other gifts in kind

INSTRUCTIONS FOR USING THIS FORM

Instead of using this form, you can log on to easymatch.com/carmax or carmaxcares.com with your employee ID number and apply for a matching gift online.

- Complete Part A.
- Send the form to the organization.
- The organization completes Part B, verifying your donation or volunteer time, and mails the form to the Program Administrator (the address is listed in Part B).
- The Program Administrator verifies your eligibility, and the eligibility of the organization to which you sent your gift or volunteered your time.
- The Matching Grants are paid quarterly – in January, April, July, and October.

NOTE TO ASSOCIATES

The CarMax Foundation may suspend, amend or discontinue the program at any time without advance notice and reserves the right to determine whether a grant shall be made based on eligibility. If an ineligible person or organization generates a grant through the Matching Gifts Program, The Foundation will expect return of the grant from the organization. A grant from The CarMax Foundation does not constitute an endorsement by The Foundation or by CarMax.