



# Chevron Humankind Match Request Form for Retiree Contributions

Chevron Humankind supports employees, retirees and corporate directors in their commitment to build better communities. We invite you to request a 1-to-1 match for your financial contributions to any eligible nonprofit.

To request a match for volunteer time, use form GO-1777-B, "Chevron Humankind Grants for Good Form."

**You should not submit this form if you request a match online.** Request a match online at <https://www.easymatch.com/chevron>. More information about Chevron Humankind guidelines is available at this site.

Match requests must be submitted to Chevron Humankind by **December 31** of the year of contribution.

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## Eligible Contribution Choices for Retiree Contributors

Direct, one-time (\$25.00 minimum per gift): Contributions must have been made in cash or by check or credit card or be in the form of marketable securities. Donors of securities must transfer full ownership rights to recipient organizations. Securities must have a reliable market quotation available to determine value and will be matched by using the average of the high and low stock prices on the date of the gift.

Private "family" foundations and Donor Advised Funds: Donor Advised Funds must be directly funded by the employee, retiree or director only, and the Fund must maintain a separate account segregating the contributions of the donor. Contributions made by a qualified "family" foundation or Donor Advised Fund must be directed by the donor and made on his or her behalf.

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## Eligible Participants

- All Chevron U.S.-paid employees and Chevron employees who are based in the United States and have six months of company service
- Former employees who retired having met eligibility requirements for retiree medical coverage from Chevron Corporation, a Chevron Corporation acquired company, and/or a Chevron affiliated company
- Current and retired members of the board of directors of Chevron Corporation

Spouses and surviving spouses of Chevron employees or retirees and employees and retirees of non-wholly owned subsidiaries of Chevron are not eligible to participate in Chevron Humankind.

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## Contribution Limits

The Chevron Humankind matching gift fund is capped at \$15 million. Once the fund has been exhausted during a calendar year, a notice will be posted on the Chevron Humankind Web site, and any requests received subsequently will not be matched in that year. Total annual individual caps are as follows:

- Up to \$5,000 per year per employee or director
- Up to \$2,000 per year per retiree

These caps represent matching funds and grants combined. See the Chevron Humankind Web site for details regarding Grants for Good.

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## Eligible Recipient Organizations

The following organizations may be eligible to receive a match from Chevron Humankind:

- Nonprofit organizations and members of nonprofit groups that are recognized by the U.S. Internal Revenue Service both as tax-exempt under Section 501(c)(3) of the Internal Revenue Code and as public charities.

**Note:** Chevron will consider matching gifts to programs operated by faith-based organizations if those programs (a) are open to all individuals in the community regardless of religious belief; (b) serve a secular purpose, such as a food pantry or a homeless shelter; and (c) do not require participants to join in religious worship as a condition of receiving the services that the organization offers.

- Civic organizations (such as a volunteer fire department) recognized by the IRS as tax-exempt under Section 501(c)(4) of the IRC
- Governmental entities such as public libraries, publicly owned and operated museums, municipal zoos, public schools, state colleges and universities and community colleges

Entities that are not eligible to receive Chevron Humankind matching funds and grants include organizations that violate Chevron's nondiscrimination policy or that represent a conflict of interest with Chevron's business interests. See program guidelines on the Chevron Humankind Web site for more information.

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## Administrative Conditions

Chevron Corporation will not provide names of eligible individuals or organizations to outside groups. Interpretation of each application shall be made by Chevron Corporation, and all decisions regarding match eligibility are final. No obligation is imposed upon or accepted by Chevron Corporation by reason of any application to the program(s) for funding. Chevron Corporation reserves the right to suspend, amend, revoke, modify or terminate, in whole or part, any program at any time. Chevron Corporation reserves the right to audit institutional/organizations' records and documents pertaining to this program. If an ineligible gift or invalid representation of employee involvement generates an expenditure of Chevron Humankind funds, Chevron Corporation will expect the return of its gift from the recipient institution/organization. After review and authorization, payments are made on a periodic schedule and may be subject to calendar-year budgetary limitations. Funds for Chevron Humankind will be budgeted in the consolidated charitable contribution budget.



# Chevron Humankind Match Request Form for Retiree Contributions

You should not submit this form if you request a match online. Request a match online at <https://www.easymatch.com/chevron>. Chevron does not provide personal tax advice and suggests that you consult a tax professional for information on charitable contributions. We also suggest that you have in your files a copy of your check or credit card receipt and a copy of this form.

## SECTION A: To be completed by donor. Send the original signed, completed form to the eligible recipient organization.

Recipient Organization: \_\_\_\_\_ Gift Amount: \$ \_\_\_\_\_  
See "Eligible Recipient Organizations" on previous page. Mark one:  cash  check  credit card

Location: \_\_\_\_\_ \$ to Match: \$ \_\_\_\_\_  
City State

Program: \_\_\_\_\_ Date of Gift: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Within Recipient Organization, if applicable.

If you are contributing securities, please enter the security name, its stock symbol, and the number of shares and their value (in cash or estimated stock) here:

\_\_\_\_\_  
Last Name First Name MI  
\_\_\_\_\_  
Home Address City State ZIP  
( ) -  
\_\_\_\_\_  
Email Address Daytime Phone

The recipient organization may acknowledge me as a contributor.

Name(s) for acknowledgement: \_\_\_\_\_

I prefer to remain anonymous. Please do not release my name to the recipient organization I have designated.

I certify that the gift described above is a personal contribution that has been made voluntarily and that my gift fully complies with the provisions set forth by Chevron Humankind guidelines. I also certify that my gift does not directly benefit me, members of my family or any other person(s) designated by me.

\_\_\_\_\_  
Signature of Donor Date Signed

## SECTION B: To be completed by eligible recipient organization.

Please verify receipt of the gift described in Section A. If this is your first time requesting a matching gift from Chevron, please include a copy of your IRS tax-exempt letter showing 501(c)(3) or 501(c)(4) status.

No goods or services have been promised or provided to Chevron, to the donor or to person(s) designated by the donor in association with this contribution.

I hereby certify that the gift described in Section A fully complies with Chevron Humankind provisions stated on this application and will be applied solely to the charitable activities of the organization. The organization has not received any notification (written or oral) from the IRS that its tax exemption under Section 501(c)(3) or 501(c)(4) has been revoked or is being questioned. The organization meets all of the requirements in Section 170(c). If the organization is not a corporation, I certify that the funds will be used only within the United States.

**This match request must be submitted to Chevron Humankind by December 31 of the year in which the contribution described above was made. Processing will be delayed if this form is not completed and signed.**

\_\_\_\_\_  
Name of Recipient Organization Employer Identification Number (required)  
\_\_\_\_\_  
Address City State ZIP  
( ) - ( ) -  
\_\_\_\_\_  
Telephone No. Fax No. Email Address Web Site Address

I hereby certify that a gift of \$ \_\_\_\_\_, of \$ \_\_\_\_\_ is tax-deductible, \_\_\_\_\_ shares \_\_\_\_\_  
was received on \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

\_\_\_\_\_  
Name (please print) Signature of Authorized Financial Officer  
\_\_\_\_\_  
Title Date Signed

Send the signed, completed form to the following address. If you need further information, feel free to contact us.

**Chevron Humankind  
PO Box 2160  
Princeton, NJ 08543-2160**

**Telephone: 1-877-202-2374 (Monday through Friday, 8 a.m. to 8 p.m. EST)  
Fax: 1-609-799-8019  
Email: [Chevron@easymatch.com](mailto:Chevron@easymatch.com)**

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