

Matching Gifts Program

Introduction

SCANA Corporation, deeply committed to supporting education, has implemented an Employee Matching Gifts Program to encourage employees to join the Company in the voluntary support of colleges, universities, and public and private schools K-12.

Eligible Individuals

Full-time employees of SCANA Corporation, and its subsidiaries who have completed 12 months of service at the time of the donation.

Eligible Institutions

Graduate schools and universities, four-year colleges and two-year junior colleges, technical institutes, and public and private schools K-12 that are:

- located within the United States
- recognized by the Internal Revenue Service as tax-exempt educational institutions, to which contributions are deductible for federal income tax purposes (please include proof of IRS 501(c)(3) filing status). Private schools should also include a statement of their nondiscriminatory policy toward students.

Eligible Contributions

Only gifts that support the primary educational objectives of approved institutions will be matched.

Gifts must be charitable contributions which are deductible for federal income tax purposes. If the donor, any member of the donor's family or any individual designated by the donor has received or will receive a benefit or gift as a result of the donor's contribution or the matching of the contribution, the donor's gift will not constitute an eligible contribution for purposes of this program and will not be matched.

Gifts must be paid, not merely pledged, directly to an approved institution and must be in cash, check or money order.

The minimum contribution made each time by an individual must be \$100. The total of all contributions by an individual within a calendar year and eligible to be matched is \$1,500. Contributions made to schools within the states of South Carolina, North Carolina, and Georgia will be matched \$1 for \$1. Contributions made to schools outside the states of South Carolina, North Carolina, and Georgia will be matched \$.50 for \$1.

Contributions may be made to an eligible institution at any time during a calendar year; however, the act of matching such contributions will occur quarterly. To be matched during the calendar year of your contribution, completed matching gift forms must be received by SCANA Community Affairs no later than November 30.

Ineligible Contributions

SCANA Corporation will not match:

- tuition payments or payments made in lieu of tuition
- class or other dues
- gifts or assessments fixed by the school as a condition for student enrollment
- gifts for private benefit of specified students or professors, including gifts to provide scholarships or financial aid to individuals designated by the donor
- payments for goods and/or services
- payments for tickets, dinners, lunches, special events, whether athletic, social or cultural
- gifts that afford the donor special privileges or benefits of more than nominal monetary value - preferred seating at athletic events or options to purchase such seating, use of facilities, special parking, etc.
- those made to vocational schools such as cosmetology, cuisine, etc.

Application Process

- The employee should fill in Forms A and B below and forward the entire brochure with his or her gift to the school or university.
- A responsible officer at the school or university should review and fill in the appropriate section of Form C and forward Forms A, B and C to Community Affairs, SCANA Corporation, B231, Cayce, SC 29033.
- SCANA Community Affairs will review the forms for eligibility and will authorize the payment of the matching funds in accordance with the provisions of the program. Checks will be made payable to the school or university and mailed quarterly.
- SCANA Community Affairs will notify the donor with a receipt when the matching contribution has been mailed to the school or university.

Administrative Conditions

The interpretation, application and administration of this program shall be determined by the SCANA Community Affairs Department, and its decisions shall be final.

SCANA reserves the right to suspend, change or terminate this program at any time with respect to ongoing contributions. SCANA may refuse to match any gift that the Company deems as not supportive of the overall mission of this program. This program is subject to our auditing procedures.

Requests for further information and all correspondence relating to this program should be addressed to Community Affairs, SCANA Corporation, B231, Cayce, SC 29033.

DONOR: COMPLETE FORMS A AND B. SEND ENTIRE BROCHURE TO YOUR SCHOOL.

FORM A (When your gift has been matched, this will be sent to you as a receipt.)

Date of Gift _____ Amount \$ _____ Name of Institution _____
(\$100 minimum)

Donor Name _____

Home Address _____

City _____ State _____ Zip _____

It is a pleasure to inform you that a check has been mailed to your school matching the total of individual gifts reported this quarter. The Company is pleased to participate in supporting education through the Matching Gifts Program.

SCANA Corporation Representative

FORM B

Employee Name _____

Home Address _____

Company SCANA SCE&G PSNC ENERGY SCANA ENERGY OTHER Date Employed _____

Employee # _____ Dept. Name _____ Dept.# _____ Mail Code _____

School or University Receiving Gift _____ Location _____

Gift Amount \$ _____ Exact Date of Gift _____
(\$100 minimum)

Form of Gift Cash Check Money Order Credit Card

Apply my gift and matching contribution to Unrestricted Student Aid Building Fund Other _____

The employee's signature below authorizes recipient to report this gift to SCANA Corporation to apply for a matching contribution under the Matching Gifts Program and affirms that the gift listed above has been made in the amount and in the form indicated and meets SCANA's eligibility requirements for matching gifts.

Employee Signature

Date

Matching Gifts Program



FORM C Must be completed by the appropriate official at the school and returned to this address: Community Affairs
SCANA Corporation, B231
Cayce, SC 29033

This certifies that we meet all eligibility requirements of the SCANA Corporation Matching Gifts Program.

We have received a gift of \$ _____ from _____
Name of Donor

Signature of School Official Printed Name of Official

Title Date

Name and Address of Institution

Phone

- I have enclosed a copy of the donor's check and also proof of our IRS 501(c)(3) filing status.
- If I represent a private school, I have also enclosed a statement of our nondiscriminatory policy toward students.