MATCHING GIFTS TO EDUCATION AUTHORIZATION FORM
Believing in People. Investing in Education.

HOW DOES THE MATCHING GIFTS TO EDUCATION PROGRAM WORK?

- Toyota Motor Sales, U.S.A., Inc. (TMS) will match contributions by any full-time or part-time associate of TMS and/or its subsidiaries, as well as Toyota Financial Services (TFS).
- Matching gifts will be made, dollar for dollar, to qualifying educational institutions of the associate’s choice, subject to the limitations as specified within this form. A minimum $25 contribution is required to be eligible for each matching donation by TMS. An associate may contribute a one-time gift or accrued gifts equaling $5,000 per year.
- Gifts must be made by personal check, cashier’s check or credit card only.

HOW DO I PARTICIPATE?

- Please complete Part A of the Matching Gifts Authorization Form and mail it, along with your contribution, to the educational institution of your choice.
- An organization official should complete Part B of the form and return it to Toyota.

WHAT EDUCATIONAL INSTITUTIONS QUALIFY FOR THIS PROGRAM?
Qualifying educational institutions must be nonprofit and tax-exempt. They include:

- Elementary or secondary schools (private, public, charter, PTAs)
- Colleges or universities
- Education foundations
- Special schools for the mentally or physically challenged

WHAT INSTITUTIONS/PROGRAMS DO NOT QUALIFY?

- Specific clubs/organizations within the qualifying institutions (e.g., pre-schools, booster clubs, athletic teams, radio stations, learning centers, cultural centers, museums, alumni associations, professional schools, technical institutions)
- Tuition fees, class dues, reunion costs, membership dues and all other payments that are not direct education gifts
- Contributions made to secure a direct benefit for an associate or for his/her family, including purchasing premiums, goods or tickets to events.

QUESTIONS:
Contact the Corporate Contributions Department: Toyota Motor Sales, U.S.A., Inc., 19001 S. Western Ave., Torrance, CA 90509, (310) 468-3231.

Toyota Motor Sales, U.S.A., Inc. reserves the right to amend or terminate this program at any time. If this were to occur, gifts made prior to the applicable amendment or termination date would be matched according to program terms at time of the gift.
PART A – TO BE COMPLETED BY ASSOCIATE (DONOR)

Enclosed is my contribution of $______________. I authorize you to report this gift to Toyota Motor Sales, U.S.A., Inc. in the agreed upon amount of funds under its Matching Gifts to Education Program.

Please print clearly.

Date: _____________________________________________

Name: _____________________________________________

Employee ID: ______________________________________

Name of TMS Department/TMS Subsidiary/TFS Region:

______________________________________________________________________________

Work Address: __________________________________________

Work Phone: ______________________________________

Receiving Institution: __________________________________________

______________________________________________________________________________

I hereby certify that this contribution meets all the criteria set forth by Toyota, and that I will not receive any goods or services for this contribution.

Name (signature): __________________________________________

COMPLETED FORM SHOULD BE FORWARDED TO THE BENEFICIARY INSTITUTION FOR CERTIFICATION AND VERIFICATION SIGNATURE.

PART B – TO BE COMPLETED BY INSTITUTION (RECIPIENT OF MATCHING FUNDS)

We certify that a contribution of $______________ has been received as of ________________, that the information on this form is accurate, and that the named institution is recognized by the Internal Revenue Service as an organization to which gifts are tax deductible.

I also certify that the donor will not receive any goods or services for this contribution.

Educational Institution’s Corporate Name:

______________________________________________________

Address: __________________________________________

City, State, Zip: ________________________________

Authorized Person: __________________________________

(please print):

Title: ________________________________

Authorized Person: ________________________________

(signature)

Work Phone: ______________________________________

EDUCATIONAL INSTITUTION: In order for Toyota to match these funds, please return this completed form and a copy of the check to:

Toyota Motor Sales, U.S.A., Inc.
Corporate Contributions, Matching Gifts to Education Program
19001 S. Western Avenue, HQ40
Torrance, CA 90509