



TOTAL USA FOUNDATION
Matching Gift Program

Section A. To be completed by Donor. **Donor:** Send form with contribution to the recipient organization.

| | |
|----------------------------------|--|
| Name _____ | Non-Profit Name _____ |
| Home Address _____ | - |
| City _____ State _____ Zip _____ | Exact Amount of Gift \$ _____ |
| Social Security Number _____ | - |
| Operating Company _____ | Certification: I hereby certify that my gift is a voluntary contribution made from my own resources and not from gifts or loans from any other person or organization. My gift does not represent, in any way, tuition or payment in exchange for, or in expectation of, some monetary or other benefit to be given to me, or to any person or organization named by me. |
| Work Location _____ | Donor's Signature _____ |
| Work Phone _____ | - |
| | Date _____ |

Section B. To be completed by recipient organization. **Financial Officer:** Scan and Email to USACommunications@totalenergies.com or send entire form to: Total USA Foundation P.O. Box 674411 Houston, TX 77267-4411. Include the most recent copy of recipient's IRS determination letter classifying it as tax exempt under Section 501 (c)(3), not a private foundation under Section 509 (a) of the Internal Revenue Code of 1986.

| | |
|----------------------------------|--|
| Name _____ | Certification: I certify receipt of the gift described in Section A (above) on behalf of the named donor in the amount of \$ _____ on (month/day/year) _____ and certify that this institution/organization is a non- profit public charity, and that contributions to it are tax deductible under the Internal Revenue Code of the United States. Moreover, this institution/organization is not a private foundation as defined in Section 509 (a) of the Internal Revenue Code. Furthermore, I certify that this gift does not represent, in any way, tuition or payment in exchange for, or in expectation of, monetary or other benefits to be given to the donor or any person or organization named by the donor. This gift will not be used for religious or political purposes, nor to fulfill a religious or political commitment. |
| Title _____ | |
| Organization Name _____ | |
| Street Address _____ | |
| City _____ State _____ Zip _____ | |
| Phone _____ | |
| Exact Amount of Gift \$ _____ | |
| | _____ |
| | Signature of duty authorized representative of recipient organization |
| | Date _____ |



TOTAL USA FOUNDATION

Matching Gift Program

The Program

The purpose of the Total USA Foundation Matching Gift Program is to encourage TotalEnergies' employees to give their personal financial support to eligible institutions and organizations. Gifts by individuals will be matched by the Foundation according to the Matching Gift policies in effect at the time of the gift.

Eligible Donors

Full-time employees of TotalEnergies are eligible to participate in the Matching Gift Program. At least one year's service is required unless prior waiver is obtained from the Foundation Board of Directors.

Eligible Recipient Organizations

All accredited four-year (and approved upper division two-year) educational institutions located in the United States, from which the donor received a degree, or with which the affiliated in an official capacity are eligible. Matching gifts are made directly to educational institutions or fund-raising to alumni associations. Public broadcasting system stations located in cities where we have a significant number of employees in the United States are also eligible. Other organizations may be specified as eligible for matching gifts by the Foundation Board of Directors. Organizations must prove they are educational exempt under Section 501(c)(3) of the 1986 Internal Revenue Service code and not a private foundation under Section 509(a).

Eligible Contributions

To be eligible, a contribution must be a personal gift from the eligible donor and cannot include resources from other people or institutions. The contribution: (1) Must not be a payment for which reimbursement of any kind is made by another individual or organization; (2) Must be paid, not merely pledged and; (3) May be a payment by cash, check, money order, credit card or electronic payments. The following contributions are not eligible: (1) Fees for any service; (2) Personal memberships for which substantial benefits are received; (3) Tickets of any kind; (4) Amounts related to athletics or payable as subscription fees for publications; (5) Gifts of real or personal property; (6) Bequests; (7) Life income trust arrangements; or (8) donations to organizations that discriminate on the basis of race, creed, color, sex, age, or disability.

Administrative Conditions

The minimum gift that will be matched is \$25 and the maximum gift(s) per person per calendar year is \$2,500. Higher amounts may be allowed if the Foundation has sufficient income and the approval of the Foundation Board of Directors. For a \$1,000 or more, please provide a photocopy of the gift (personal check, etc.) or a copy of the official receipt. At its discretion, the Foundation may seek additional information about the organization, or the intended use of matching funds, before the matching gift is made. The Foundation reserves the right to determine whether any gift shall be matched and may change or terminate this program at any time without notice.