

# MATCHING GRANT PROGRAM APPLICATION



## PART I DONOR INSTRUCTIONS

COMPLETE PART I OF THIS FORM—one for each gift. Please print or type.

SEND THE FORM AND A COPY OF THE PROGRAM GUIDELINES with your contribution to the recipient organization.

*Maximum contribution amount and match ratio differ according to division. Please check on employeeConnection for details on your division's program.*

LAST FOUR DIGITS OF SOCIAL SECURITY #

DONOR NAME

HOME ADDRESS

CITY/STATE/ZIP

COMPANY

DIVISION/DEPARTMENT

BUSINESS TELEPHONE, INCLUDING AREA CODE

E-MAIL ADDRESS

EXACT DATE OF GIFT

\$ AMOUNT OF GIFT (MIN\$25)      \$ AMOUNT TO BE MATCHED (MIN\$25)

TYPE OF GIFT: PLEASE CHECK ONE:     CHECK     CREDIT CARD

NAME OF ORGANIZATION

ORGANIZATION CITY, STATE

RESTRICTION OR PURPOSE (IF ANY)

I certify that neither my family nor I will derive any direct or indirect financial or material benefit from this contribution. I authorize the above-named recipient organization to report this gift to Time Warner for the purpose of applying for a matching gift. I certify that my gift is a voluntary contribution, that it fully complies with the provisions of the program described herein, and does not represent in any way a fee for a service or benefit. Any misrepresentation by me of the statements made herein will forfeit my rights to any matching contributions and, in addition, may result in violations of law. In addition, I certify that I have not been nor will be reimbursed by anyone for this contribution. I have read and understood the guidelines of the Time Warner Matching Grants Program.

SIGNATURE OF EMPLOYEE

DATE

## PART II RECIPIENT ORGANIZATION INSTRUCTIONS

VERIFY RECEIPT OF GIFT.

COMPLETE PART II OF THIS FORM. PLEASE PRINT OR TYPE.

IF THIS IS YOUR FIRST matching gift request to the Time Warner Matching Grants Program, please enclose a copy of your 501(c)(3) determination letter and a brief description of your organization's primary mission statement or purpose.

FORWARD FORM TO THE ADDRESS PRINTED BELOW.

EMPLOYER IDENTIFICATION NUMBER (EIN)

ORGANIZATION NAME

ADDRESS

CITY/STATE/ZIP

TELEPHONE, INCLUDING AREA CODE

FAX, INCLUDING AREA CODE

E-MAIL/WEBSITE ADDRESS (IF ANY)

DATE GIFT RECEIVED

\$ AMOUNT OF GIFT      \$ TAX-DEDUCTIBLE GIFT AMOUNT

I hereby certify that this organization/program meets the eligibility requirements of the Time Warner Matching Grants Program, and that neither the donor nor Time Warner will derive any personal material benefit from this gift or match.

AUTHORIZED OFFICER'S NAME (PLEASE PRINT)

TITLE (PLEASE PRINT)

SIGNATURE OF AUTHORIZED OFFICER

DATE

### MAIL COMPLETED FORM & ANY REQUIRED ENCLOSURES TO:

Time Warner Matching Grants Program  
P.O. Box 8449  
Princeton, NJ 08543-8449

Phone: Toll-free 1-866-295-5529

E-mail: TimeWarner@easymatch.com

FOR MORE DETAILS ABOUT MATCHING GRANTS, VISIT [HTTPS://INFOCENTER.TWI.COM/GO/MG](https://infocenter.twi.com/go/mg)

# MATCHING GRANT APPLICATION PROGRAM GUIDELINES

# Time Warner Cares

## How It Works

Eligible employees may contribute to arts and culture nonprofits or to accredited educational institutions and the company will match the donation according to pre-set match ratios and limits that vary by division.

## Who Can Participate

All regular, benefits-eligible, United States-paid employees of Time Warner Inc. and its participating divisions and subsidiaries may participate (including full-time, part-time, expatriate and contract employees who are benefits-eligible).

**Participating divisions include:** Time Warner Corporate, HBO, Synapse, Time Inc., Turner Broadcasting System and Warner Bros.

## How To Apply

*Employee:* Fill out PART I; mail your contribution and the entire form to the designated organization.

*Organization:* Complete and countersign PART II, thereby certifying that the contribution has been received and is eligible under this program. The entire form with required documents should be mailed to:

Time Warner Matching Grants Program  
P.O. Box 8449  
Princeton, NJ 08543-8449

## Approved Applications

If the application is approved, the matching funds will be sent directly to the nonprofit organization within six to eight weeks with an e-mailed notification to the employee (when applicable).

Please note that Matching Grant totals are calculated on a calendar year basis using the date that the employee made the contribution. For example, if an employee used the Matching Grant program to make a contribution to her alma mater in December 2005 and the match was mailed to the university eight weeks later in January 2006, the match will be credited against her 2005 match limit.

**All application materials become the property of Time Warner and will not be returned. The Company reserves the right to change or terminate the program at will.**

## If You Have Any Questions

Please contact us at [TimeWarner@easymatch.com](mailto:TimeWarner@easymatch.com) or by calling 1-866-295-5529.

## Eligible Organizations

### EDUCATIONAL INSTITUTIONS

Qualifying public or private colleges, universities or graduate schools; two-year junior or community colleges located in the United States that are accredited by a recognized national or regional accrediting agency and approved by the Internal Revenue Service as tax-exempt institutions to which contributions are deductible for federal income tax purposes.

Alumni funds, foundations and associations connected with an eligible institution, provided that all the contributed funds will be transmitted to the institution for its use.

Consortiums that distribute the contributed funds to their member colleges (e.g., The United Negro College Fund).

Qualifying public and private elementary and secondary schools (N through 12th grade) that are located in the United States and are properly accredited and approved by the IRS as tax-exempt institutions to which contributions are deductible for federal income tax purposes. Private schools must provide proof of accreditation by a recognized accrediting agency.

### ARTS & CULTURE ORGANIZATIONS

Qualifying nonprofit arts and culture organizations whose primary focus is on activities that are open to and operated for the benefit of the general public, located in the United States, and recognized as tax-exempt under Section 501(c)(3) of the Internal Revenue Code. Examples include public radio and television, performing arts companies, museums, public libraries, art galleries, theaters, dance and music groups, planetariums, zoos and historical societies and restorations open to the public.

## Ineligible Organizations & Matches

GIFTS MADE BY or through Community Trusts or similar organizations, including charitable remainder trusts, donor advised funds, or family foundations

GIFTS MADE IN LIEU of tuition payment for services

MEMBERSHIP FEES for which benefits are received

DUES to alumni(ae) or similar groups

BEQUESTS or life income trust arrangements

PAYMENTS FOR TUITION, books or other student fees

FEES FOR ANY SERVICE or materials received or subscriptions for publications

PLEDGES, bequests, insurance premiums

TICKETS TO ATHLETIC, cultural or social events, lunches or dinners

GIFTS OF REAL or personal property

"COLLECTIVE" CONTRIBUTIONS or funding from sources other than those of the individual submitting the form

GIFTS OF ELIGIBLE donors' spouses

DONATIONS to organizations that engage in illegal or discriminatory practices

**EmployeesFirst**