

THE AIG MATCHING GRANTS PROGRAM

INSTRUCTIONS

Donor:

- Complete Part 1 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.

Recipient Organization:

- Verify receipt of gift.
- Complete Part 2 of this form. *Please print or type.*
- If this is your first matching gift request to the AIG Matching Grants Program, please enclose a copy of your Internal Revenue Service 501(c)(3) IRS determination letter and a brief description of your organization's primary mission statement or purpose.
- Forward form to the address printed below.

PART I - DONOR SECTION

DONOR EMPLOYEE NUMBER (FOUND ON YOUR PAYCHECK)*

DONOR SIGNATURE

DATE

DONOR NAME

SPOUSE'S NAME (IF APPLICABLE)

DONATION WAS MADE BY: (CIRCLE ONE)

SELF

SPOUSE

HOME ADDRESS

CITY/STATE/ZIP

COMPANY NAME

OFFICE TELEPHONE, INCLUDING AREA CODE

WORK E-MAIL ADDRESS

EXACT DATE OF GIFT

\$

\$

AMOUNT OF GIFT (MIN \$25)

AMOUNT TO BE MATCHED (MIN \$25)

NAME OF ORGANIZATION

ORGANIZATION CITY, STATE

RESTRICTION OR PURPOSE (IF ANY)

*AIG'S DONATION WILL BE UNRESTRICTED

I hereby certify that I have read the guidelines set forth in the Matching Grants brochure and that this contribution is fully eligible under the guidelines.

PART II - RECIPIENT ORGANIZATION SECTION

EMPLOYER IDENTIFICATION NUMBER (EIN)

ORGANIZATION NAME, AS LISTED ON 501(c)(3) DETERMINATION LETTER

ADDRESS

CITY/STATE/ZIP

TELEPHONE, INCLUDING AREA CODE

FAX, INCLUDING AREA CODE

E-MAIL

WEBSITE ADDRESSES (IF ANY)

DATE GIFT RECEIVED

\$

\$

AMOUNT OF GIFT

TAX DEDUCTIBLE GIFT AMOUNT

I hereby certify that the gift specified in Part 1 has been received from the donor, and that this organization/program is tax-exempt under Section 501(c)(3) of the Internal Revenue Code, and that neither the donor nor AIG 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 AND ANY REQUIRED ENCLOSURES TO:

American International Group, Inc
Matching Grants Program
PO Box 8857
Princeton, NJ 08543-8857

*Employee Identification Number

Employees now have an additional identifier called Employee Number. We will be phasing in the use of employee numbers throughout all AIG companies. The Matching Grants form asks you to provide your employee number for identification and authentication purposes.

If you do not know your Employee Number, please call Human Resources.