



ADDING VALUES TO STRONG PERFORMANCE.

## Charitable Gift Annuity Application Form

### STEP 1 ABOUT YOU

**Donor #1 Information**

Name				Social Security Number	
Street Address				Telephone Number	( )
City		State		Zip	
Birthdate			Email Address		

**Donor #2 Information**

Name				Social Security Number	
Street Address				Telephone Number	( )
City		State		Zip	
Birthdate			Email Address		

### STEP 2 YOUR GIFT

- Check: Check Number \_\_\_\_\_ Amount \$\_\_\_\_\_
- I will wire transfer this gift. Please provide necessary information.
- Securities (List below):
  - I will instruct my broker to transfer this gift. Please provide necessary information.
  - I will forward physical certificates under separate cover.

Name of Stock/Bond	Number of Shares	Present Value	Date Acquired	Cost Basis
				\$
				\$
				\$
				\$

Please take care in determining the ownership of appreciated, long-term securities. Adverse capital gains consequences may arise depending in part on ownership status. Additionally, if a Donor is contributing appreciated, separately-owned securities for the benefit of the donor and another person, it is possible that no portion of the annuity payments will be tax-free.

Please complete all four pages

Please complete all four pages

**STEP 3**

**LIFETIME PAYMENTS**

Please **check one** of the following to indicate how you wish to have your gift annuity payments issued:

- One life
- Two lives (single payments to both, continuing until the death of the second)
- Two successive annuitants (payments to one, then to another)

❖ **PAYMENT RECIPIENT(S)**

Gift annuity payments will be made to you, the Donor(s), unless other payment recipients are named below.

- Please make gift annuity payments to someone other than the Donor(s) as listed below:

**Life Income Beneficiary #1**

<b>Name</b>				<b>Social Security Number</b>		
<b>Street Address</b>				<b>Telephone Number</b>	(    )	
<b>City</b>			<b>State</b>			<b>Zip</b>
<b>Birthdate</b>			<b>Email Address</b>			

**Life Income Beneficiary #2**

<b>Name</b>				<b>Social Security Number</b>		
<b>Street Address</b>				<b>Telephone Number</b>	(    )	
<b>City</b>			<b>State</b>			<b>Zip</b>
<b>Birthdate</b>			<b>Email Address</b>			

❖ **METHOD OF PAYMENT**

- Check
- Direct Deposit (Complete information below)

<b>Name</b> (as it appears on Bank Account)			<b>Account Type</b>	<input type="radio"/> <b>Checking</b>
				<input type="radio"/> <b>Savings</b>
<b>Bank /Depository Name</b>				
<b>Account No.</b>				
<b>ACH Credit Routing No.</b>				

Please attach a voided check (not a deposit slip) from the account you wish your payments to be deposited.

\_\_\_\_\_ (Name) hereby authorizes Friends Fiduciary Corporation to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to our account indicated below at the depository named above. This authority is to remain in full force and effect until FFC has received written notification of its termination or change in such time and in such manner as to afford FFC and the Bank/Depository a reasonable opportunity to act on it.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please complete all four pages**

**❖ PAYMENT FREQUENCY**

Payments are made at the end of each period, based on the selected frequency.

- Quarterly                       Semi-Annually                       Annually

*For gift annuities in excess of \$100,000 monthly payments may be elected. Please contact FFC for more information.*

**❖ PAYOUT RATE**

Friends Fiduciary follows the American Council on Gift Annuities' (ACGA) recommended gift annuity rates for payments. You may, however, elect a payout rate less than the ACGA's recommended rates. If a lesser rate is requested, you may receive a larger charitable income tax deduction in exchange for a more modest annuity payment, and your selected charity(ies) will likely receive a larger gift. Please indicate your desired annuity payment rate:

- I request the ACGA recommended rate
- I request a rate lower than the ACGA recommended rate: \_\_\_\_% (please insert desired rate)

**❖ PAYMENT START DATE**

Please check one of the following to indicate whether you want your payments to begin immediately or be deferred until a specified month and year in the future. Check one of the following:

- Immediate payments.** Payments begin at the end of the current calendar quarter.
- Flexible Deferred payments.** Payments begin in the future, within a specified 1-5 year window of time, but at least one year from the date of the gift  
Begin payments within this window of years: 20\_\_ to 20\_\_ (please insert desired years)
- Deferred payments.** Payments begin in a specified year, at least one year from the date of the gift  
Begin payments in : \_\_ Quarter 20\_\_ (please insert desired fiscal quarter & year)

**STEP 4 YOUR LEGACY GIFT**

*The residuum of our charitable gift annuity will be directed to the following charitable organizations:*

**Charitable Beneficiary 1:** \_\_\_\_\_ %                      **Is this gift anonymous?**  Yes  No

<b>Name</b>				<b>Telephone Number</b>	(    )
<b>Contact Person</b>					
<b>Street Address</b>					
<b>City</b>		<b>State</b>		<b>Zip</b>	
<b>Charitable Use</b>					

**Charitable Beneficiary 2:** \_\_\_\_\_ %                      **Is this gift anonymous?**  Yes  No

<b>Name</b>				<b>Telephone Number</b>	(    )
<b>Contact Person</b>					
<b>Street Address</b>					
<b>City</b>		<b>State</b>		<b>Zip</b>	
<b>Charitable Use</b>					

*List additional charitable beneficiaries on a separate page.*

Please complete all four pages

**STEP 5                  GIFT ANNUITY ACKNOWLEDGEMENT**

**To the Donor:** Friends Fiduciary Corporation (FFC) is a non-profit corporation, whose mission is to supply financial services to other Quaker non-profit organizations and Meetings. These services include investment management and planned giving gift administration services. FFC will issue your annuity agreement and make the annuity payments to you, or whomever you designate as the annuitant. At the conclusion of the annuity payments, FFC will distribute the remainder to the charity/charities you have designated. If you should have any questions, please talk with your development officer or contact Mimi Blackwell, Planned Giving Program Manager ~ 215-241-7272 or [mblackwell@friendsfiduciary.org](mailto:mblackwell@friendsfiduciary.org) ~ in the FFC office.

Donor Name	Donor Signature	Date
------------	-----------------	------

Donor Name	Donor Signature	Date
------------	-----------------	------

Please mail:

- ✓ Completed Application,
- ✓ Check (if making a gift of cash)
- ✓ Voided check (if electing direct deposit of annuity payments)

To: Friends Fiduciary  
Attn: Mimi Blackwell  
1650 Arch Street, Suite 1904  
Philadelphia, PA 19103