



Charitable Gift Annuity Application

Instructions:

Use the fill-in-the-blank feature to complete the following Application and the attached IRS W-9 form.

- Type in your responses using the Tab key to move between fields.
- Print the form and sign the application.

Mail completed application, IRS W-9 form, gift check made payable to “Catholic Gift Annuity” and voided check to:

Catholic Gift Annuity
150 S. Wacker Dr. Suite 2000
Chicago, IL 60606



CATHOLIC GIFT ANNUITY®

Administered by Catholic Extension

Charitable Gift Annuity Application

Enclosed is my check, payable to **Catholic Gift Annuity** for \$_____ to establish a charitable gift annuity.

I am considering donating appreciated stock. Please contact me.

Type of Annuity:

- Individual Two Lives
- Deferred - Start my payments at age _____

Payments to be made:

- Annually Semi- Annually Quarterly

NAME _____

ADDRESS _____

CITY /STATE/ZIP _____

BIRTHDATE ____/____/____ SOCIAL SECURITY NUMBER _____

PHONE _____ EMAIL _____

FOR TWO LIVES CATHOLIC GIFT ANNUITY (complete for the second annuitant):

NAME _____

BIRTHDATE ____/____/____ SOCIAL SECURITY NUMBER _____

RELATIONSHIP: SPOUSE SIBLING FRIEND

DISTRIBUTION OF REMAINING AMOUNT:

Remainder Organization Please keep my gift anonymous.

____ % NAME: _____

____ % NAME: _____

10 % Catholic Gift Annuity Reserve

100 % (Must equal 100%)

SIGNATURE _____ **DATE** _____

Upon acceptance an irrevocable agreement will be issued for execution by both parties.

Authorization for Direct Deposit of Annuity Payments

*Please attach a voided check

NAME OF BANK: _____ TYPE: ____ CHECKING ____ SAVINGS

BANK ADDRESS: _____ ROUTING NUMBER: _____

CITY: _____ STATE: _____ ZIP: _____ ACCOUNT NUMBER: _____

I AUTHORIZE CATHOLIC GIFT ANNUITY AND STATE STREET BANK TO DEPOSIT ANNUITY PAYMENTS TO THE BANK LISTED ABOVE.

SIGNATURE _____ **DATE** _____