



**DONOR(S)** Enter the name of the donor, i.e., the legal owner of the property being contributed. If property is owned jointly, enter the name of both owners. Please print clearly or type.

Name \_\_\_\_\_

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**ANNUITANT(S)** The annuitants are the individual(s) who will receive payments from the charitable gift annuity. A charitable gift annuity may have no more than two annuitants.

Check one:

- One annuitant
- Two annuitants, joint and survivorship (payments to both jointly, continuing to survivor)
- Two consecutive annuitants (payments to one, then to survivor) (Please indicate sequence below even if annuitants are the donors.)

If annuitant(s) is not the donor(s), complete the following:

First Annuitant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relationship to Donor \_\_\_\_\_

Second Annuitant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relationship to Donor \_\_\_\_\_





## ANNUITY TYPE

Will payment of the annuity be immediate or deferred?

- Immediate
- Monthly    Quarterly    Semi Annually    Annually
- Deferred (must be at least one year from date of gift)

If deferred, check and complete below:

Payments to begin:  1st quarter    2nd quarter    3rd quarter    4th quarter   of \_\_\_\_\_ (year).

## CONTRIBUTION

CASH \_\_\_\_\_ Anticipated Amount: \$ \_\_\_\_\_

SECURITIES \_\_\_\_\_

*(Include details if known; otherwise estimate fair market value and indicate the cost basis. Securities must be publicly traded. Please note if a mutual fund.)*

Description \_\_\_\_\_

Registered in the Name of \_\_\_\_\_

Date of Acquisition \_\_\_\_\_ Cost Basis \_\_\_\_\_ Estimated Fair Market Value \$ \_\_\_\_\_

*Note: Actual fair market value of securities for calculating the amount of the annuity and tax deduction will be determined when the securities are received by the University of Chicago. The Office of Planned Giving will provide specific asset-transfer instructions after this information has been reviewed and discussed with the donor(s).*

## ANNUITY PAYMENT PREFERENCE

The annuitant(s) wishes to receive annuity payments by:    check    direct deposit

Note: Please attach a voided check or deposit ticket for verification and a copy of birth certificate, passport, or driver's license. Make check(s) payable to National Spiritual Assembly.

Mother's Maiden Name \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Signature of Donor \_\_\_\_\_ Signature of Donor \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

