

Archdiocese of New York

1011 First Avenue
New York, NY 10022

Application for a Charitable Gift Annuity Agreement

I would like to arrange a gift annuity based on

Cash \$ _____ and/or

Securities (List securities on separate sheet and include cost basis)
Securities Transmitted DTC Certificate(s)

TYPE OF ANNUITY:

Individual Annuity (one-life)
(Complete Section I only)

Joint or Two-Lives in Succession Annuity*
(Complete section I & II)

Deferred Annuity
Start payments at age ____

PAYMENTS TO BE MADE:

Monthly

Quarterly

Semi-Annually

Annually

SECTION I INDIVIDUAL ANNUITY: (Please complete the following information for the sole or first annuitant)

Name (circle one) Mr./Mrs./Miss/Ms./Other _____

Address _____

City _____ State _____ Zip _____

Birthdate _____ Telephone () _____ Social Security No. _____

Relationship of first annuitant to donor _____
(self, spouse, brother, sister, aunt, uncle, mother, father, son, friend, etc.)

SECTION II JOINT OR TWO LIVES ANNUITY: (Please complete the following information for the second Annuitant)

Name (circle one) Mr./Mrs./Miss/Ms./Other _____

Address _____

City _____ State _____ Zip _____

Birthdate _____ Telephone () _____ Social Security No. _____

Relationship of first annuitant to donor _____
(Self, spouse, brother, sister, aunt, uncle, mother, father, son, friend, etc.)

Relationship of this annuitant to **first annuitant** _____
(Self, spouse, brother, sister, aunt, uncle, mother, father, son, friend, etc.)

I understand that this gift will represent an irrevocable transfer of funds to
The Archdiocese of New York

Date _____

Donor's Signature _____

Date _____

Donor's Signature _____

*Note: Joint annuity (for a married couple) pays to both annuitants and upon death of one, to the survivor for life. Two-lives annuity pays first annuitant, then upon the death of the first annuitant, it pays the second annuitant for life.

(Over please)

DONOR INFORMATION: (If other than annuitant)

Name (circle one) Mr./Mrs./Miss/Ms./Other _____

Address _____

City _____ State _____ Zip _____

Birthdate _____ Telephone () _____ Social Security No. _____

CHARITABLE BENEFICIARY: (Check only one)

- The Archdiocese of New York
- Catholic Charities of the Archdiocese of New York
- The Department of Education of the Archdiocese of New York

ADDITIONAL INFORMATION:

1. Please enclose proof of age *for each* annuitant (i.e. copy of driver's license, birth certificate, passport, etc.)
2. If annuitant(s) would like payments directly deposited, please indicate by attaching a deposit slip or voided check and include street or PO Box address of the bank.
3. Stock/Bond Powers should be completed for all securities, but sent under separate cover from the securities.
4. Checks should be made payable to one of the Charitable Beneficiaries noted above and mailed to the following address with the application:

The Archdiocese of New York
1011 First Avenue, Rm 1400
New York, NY 10022
Attention: Lorraine A. Smith
(212) 371-1000, ext. 3317

The Archdiocese of New York provides charitable gift annuity calculations as a service only. Please consult with your own tax advisor. The Archdiocese of New York uses the highest IRS discount rate to give the donor the largest charitable deduction.