

CHARITABLE GIFT FUND APPLICATION and MEMORANDUM OF UNDERSTANDING

Instructions:

- 1. Fill out this CGF application to open a CHARITABLE GIFT FUND account with Anabaptist Foundation.
- 2. Sign and date the end of the form.
- **3.** Mail, fax, or email application to: <u>Anabaptist Foundation, 55 Whisper Creek Drive, Lewisburg, PA 17837</u>. Upon receipt of your completed CGF application, our office will set up a CGF account for you. You may enclose your initial check with this application or you may send contributions at a later date. Your initial contribution must be **\$3,000** or more, and subsequent contributions **\$1,000** or more. AF will send you a receipt for cash donations and an acknowledgment for non-cash contributions.

l (we)	(the "donor" or "donors") as of the
date below, have made an irrevocable contribution to Ana	baptist Foundation, 55 Whisper Creek Drive,
Lewisburg, PA 17837, (the "Foundation") and may make fu	ture contributions to the Foundation for use in
its Charitable Gift Fund program.	

MY CONTRIBUTION IS MADE WITH THE FOLLOWING UNDERSTANDINGS:

- 1. The Foundation will establish a Charitable GIFT Fund account in the donor's name, to which the donor may add contributions, and from which they may recommend distributions to be made by the Foundation to charitable organizations.
- 2. Donations made to your Charitable Gift Fund account become the property of the Foundation, and donors retain no legal control over their gifts. Instead, donors are entitled to recommend gift distributions to churches and charities of their choice. In accordance with IRS regulations, donor recommendations are non- binding advice which the Foundation is not legally obligated to follow. The Foundation may commingle your contributions with that of other donors, and has complete investment power with respect to donor contributions. Donors have no equitable interest in their contributions or the Charitable Gift Fund. Donations are irrevocable, and no portion may be returned to the donor as a private benefit.
- 3. Distributions from the Charitable Gift Fund established in the donor's name may be made only to organizations that qualify under the Foundation's *Guidelines for Giving* included in its User's Guide, which is incorporated herein by reference (it is made a part of this Memorandum), as updated from time to time, and that qualify as churches or other tax-exempt entities under Section 501(c)(3) of the Internal Revenue Code. No gifts may be earmarked for the benefit of any private individual. A distribution from a donor's Charitable Gift Fund account may not be used to satisfy a legally binding pledge. The minimum gift amount which may be recommended in a single transaction is \$250.

When you wish to recommend where charitable funds should be distributed from your CGF account, please write, email, fax or call your assigned caseworker. Be prepared to provide:

- The name of the church or charity, along with contact information (phone number or address).
 The Foundation will assist in locating this information, if needed.
- The gift amount that you wish to recommend.
- O Whether or not your gift should be anonymous.
- Whether your gift is for where most needed or recommended for a particular use, remembering it cannot be earmarked to benefit a specific individual.
- All gift distributions must be consistent with conservative Anabaptist beliefs and values.
- **4.** The Foundation withholds a fee (0.75%, with a \$25.00 minimum) to help cover administrative expenses.

DONOR CONTACT INFORMATION: Donor Name(s): Date of Birth: Social Security #: Date of Birth: Social Security #: Address: _____ City: State Zip Code Fax: Email:_____ Church where donor is a member: Church Affiliation (fellowship or conference): **DONOR ACCOUNT NAME:** (Please check one of the following) ☐ I (we) would like our CGF account to be opened in our personal names as listed above. ☐ I (we) would like our CGF account to be opened in the following name, exactly as written below: How do you intend to use your Charitable GIFT Fund? (check all that apply) Your responses help Anabaptist Foundation manage your donated funds for short-term or long-term use. ☐ I plan to distribute 100% this year. ☐ I plan to distribute about______% this year and about______% in later years. ☐ I plan to make annual contributions to the fund. I intend to make a final contribution to my Charitable Gift Fund through my estate. ☐ I have appropriate documents drafted to accomplish this through my Will or Trust. ☐ I would like assistance to plan a gift through my estate. IN THE EVENT OF MY (OUR) INCAPACITY OR DEATH, WHO DO YOU AUTHORIZE TO DISBURSE THE REMAINDER OF YOUR FUNDS? I (we), the donor(s) shall be the spokesperson(s) to recommend distributions to the Foundation to make gifts to charity from our account. In the event of my (our) withdrawal, incapacity or death, ☐ OPTION 1: I (we) designate to advise the Foundation regarding distribution of funds remaining in our account. If more than one person is designated, shall be their spokesperson. ☐ **OPTION 2:** Remaining funds shall be distributed as designated by me (us) on Page 3 of this form. OPTION 3: CHOOSE OPTION 3 IF YOU WILL NOT YOURSELF BE MAKING ANY GIFT RECOMMENDATIONS FROM THIS ACCOUNT, AND FROM THE START YOU ARE NAMING SOMEONE OTHER THAN YOURSELF TO MAKE ALL GIFT RECOMMENDATIONS FROM THIS ACCOUNT. I (we), the donor(s) hereby designate to advise the Foundation regarding distribution of funds from this account. If more than one person is ___shall be their spokesperson. In the event of designated,

their incapacity or death, all remaining funds shall be distributed as designated on page 3 of this form.

CHARITABLE GIFT FUND RECOMMENDATIONS FOR DISTRIBUTIONS IN THE EVENT OF DONOR'S DEATH (IF NO ALTERNATE ADVISOR IS NAMED):

By not designating an alternate adviser, I (we) hereby recommend that Anabaptist Foundation make the following distribution(s) in the event of my (our) death(s):

% of funds	Church or Charitable	Organization(s)	Anonymous gift?
%	Ministry NameAddressCity, State, Zip CodeContact Person		 _
%	Ministry Name Address City, State, Zip Code Contact Person		 _
%	Ministry Name Address City, State, Zip Code Contact Person		<u> </u>
% By signing I in	Ministry Name Address City, State, Zip Code Contact Person tend to be bound by this Charitable Gift Func		Use additional sheet of paper if needed.
	·		_
Signature		Date	
Printed nam	e		
		Rath snouses must	
Printed nam	e	Gift Fund Account i	·

This application may be mailed, faxed or emailed to the Anabaptist Foundation office at: Address: 55 Whisper Creek Drive, Lewisburg, PA 17837 | Fax: 866-230-6253 |

Email: giftfund@afweb.org. All checks should be payable to Anabaptist Foundation.