

Charitable Gift Annuity Application

Thank you for your interest in supporting programming on South Carolina ETV and South Carolina Public Radio with a charitable gift annuity. The information you provide does not obligate you, in any way, to contribute to a charitable gift annuity. It will simply allow the ETV Endowment of SC to prepare an annuity illustration just for you. The personalized illustration will show the amount of annuity payments you would receive and the tax benefits available to you.

| Annuitant Full Legal Name(Annuitant(s) are the recipients of the annuity payments) | | | Birthday/ |
|--|-------------------------|-----------------|--|
| Email | | | |
| Second Annuitant Full Legal Name(if applicable) | | | /Birthday// |
| Email | | | |
| Address | | | |
| City | State | Zip | Phone |
| 2. I am considering donating:☐ Cash☐ Securities Approx | ximate current valu | e of the secur | (\$15,000 minimum) rities \$ ecurities) \$ |
| ☐ IRA charitable rollover | 1100 0001 20010 (01.18. | mai prioc oi se | .cantices, |
| 3. I am interested in an illustrationOne LifeTwo lives (payments mad | | er person for t | the duration of your lives) |
| 4. I would like to receive my ann ☐ Annually ☐ Quarterly | | ording to the f | following frequency: |
| 5. I would like for the start of my Immediate (first payment) Deferred payments (payr | t is at the end of th | e current quar | • |