## DONOR GIFT AGREEMENT AND BENEFICIARY DESIGNATION WITH THE EANFPIF2021#1 POOLED INCOME FUND OF THE ENDOW AMERICA NETWORK FOUNDATION

I/We herewith transfer to Endow America Network Foundation ("EANF"), as Trustee of the EANFPIF2021#1 Pooled Income Fund of the Endow America (the "Fund"), the property listed in Schedule A, attached hereto, to be held, administered and disposed of pursuant to the provisions of the Fund (as such Fund has been amended and may be, from time to time, further amended) and this Donor Agreement nad Beneficiary Designation ("Gift Agreement"):

Donor One:		
Name:	SS#/FEIN:	
Address:		
Telephone:	Date of Birth:	
Donor Two:		
Name:	SS#/FEIN:	
Address:		
Telephone:	Date of Birth:	
E-mail:		

**Income Beneficiary or Beneficiaries** – You may select one or two people to receive the income attributable to the property as follows:

## First Income Beneficiary If Donor 1 is also the first income beneficiary, check here $\Box$ and do not complete the information for the first income beneficiary: SS#/FEIN: \_\_\_\_\_ Name: Date of Birth: Telephone: E-mail: Second Income Beneficiary If Donor 2 is also the second income beneficiary, check here $\Box$ and do not complete the information for the second income beneficiary: Name: \_\_\_\_\_\_ SS#/FEIN: \_\_\_\_\_ Address: Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ If there are two income beneficiaries, select ONE of the following: Concurrent Payments – (Each income beneficiary will receive one-half of the income for their joint lives with the survivor receiving all of the income thereafter for his or her life.) Consecutive Payments – (The first income beneficiary will receive all income for his or her life. At the death of the first beneficiary to die, the second income beneficiary will receive all income for his or her life.)

If you are the donor and designate yourself as the first income beneficiary and the second income beneficiary's right to income is consecutive, you may reserve the right to revoke the income interest of the second income beneficiary *via* your will. You should discuss the tax effects of reserving such right with your attorney, accountant and/or other tax and financial advisors.

I/We hereby retain the right, exercisable only by my Will, to revoke the income interest of the successor beneficiary designated by me/us.

Donor One Signature	Donor Two Signature
	st, the Trustee shall sever from the Fund an amount equal are transferred property and transfer it to EEANF. Please
For its general uses and purposes	S.
For the following Donor Advised	d Fund:
For the following Sponsored Pro	ject (Please circle and initial):
Safe Schools Great Schools	
Safe Care Great Care	
Safe Streets Great Streets	
Safe Homes Great Homes	

## Representations of Donor(s)

- 1. I/We intend that this gift qualify as a gift to the Fund and this Gift Agreement shall be interpreted accordingly.
- 2. I/We declare that the contribution described in this Gift Agreement is irrevocable and is not subject to amendment or modification by me/us.
- 3. I/We represent and warrant that prior to making the transfer described herein, I/we received and read the Disclosure Statement of the EANFPIF2021#1 Pooled Income Fund of the Endow America Network Foundation and a copy of the Trust Agreement for the EANFPIF2021#1 Pooled Income Fund of the Endow America Network Foundation, and I/we agree to its terms and conditions. This Gift Agreement and the transfer of property made pursuant to this Gift Agreement shall be effective on the date of acceptance by the Trustee.

Donor One	
Signature	Date
Printed Name	
Donor Two	
Signature	Date
Printed Name	
hereby accepts said property under the terms and	Foundation, by a duly authorized representative d conditions set forth herein and in the Fund, and on on to the income interest in said property as of this
	Endow America Network Foundation Trustee
	By:
	Printed Name:

## **Endow America Network Foundation** Schedule A

My/Our GIFT consists of the following:				