

## Single Life Annuity Rates

AGE	RATE	AGE	RATE
70	5.1	81	7.2
71	5.2	82	7.4
72	5.4	83	7.6
73	5.5	84	7.8
74	5.6	85	8.0
75	5.8	86	8.2
76	6.0	87	8.4
77	6.2	88	8.6
78	6.4	89	8.8
79	6.6	90+	9.0
80	6.9		

A **Charitable Gift Annuity** provides a powerful tool by which donors can support the Sisters of the Living Word, while providing themselves a guaranteed income for life—usually at above-market rates.



“I think it is a good thing, in the financial world. I believe it is a way of supporting the Sisters. It allows the Sisters of the Living Word to promote their mission and do the work they do. There is a return to the person providing the annuity. It is a win-win all the way for both parties.”

—Mark Mass, brother of Barbara Mass, SLW

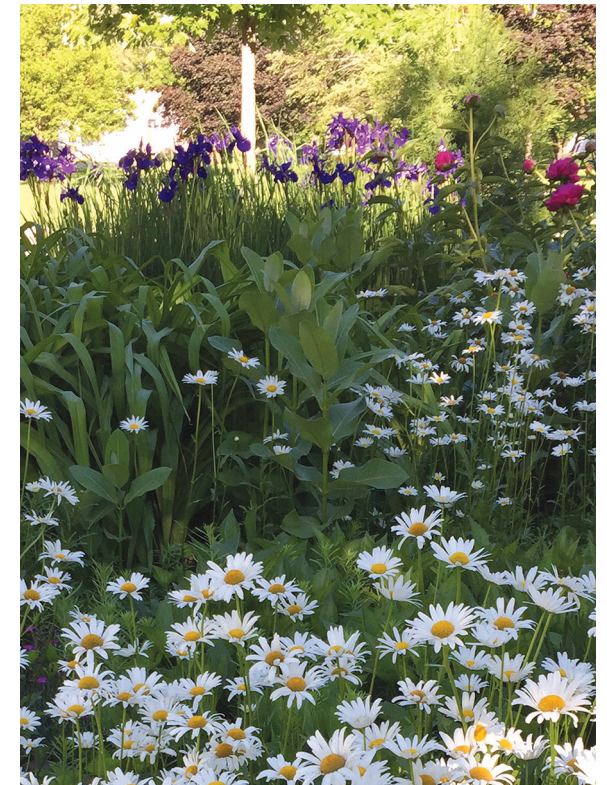


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Support the  
**Sisters of the Living Word**  
with a



and receive income  
for life





## Partner with the Sisters with your Charitable Gift Annuity

Under this program, a donor makes a contribution of cash or securities to the Sisters of the Living Word, and in return, receives an income guaranteed for life (and the life of another beneficiary, if desired). The donor also enjoys certain tax advantages associated with the contribution and the income derived from the annuity.

Upon the death of the annuitant(s), the remainder is distributed to the Sisters of the Living Word. Charitable Gift Annuities ensure that the aging Sisters will be cared for as well as providing for the continuation of their ministries.



The National Catholic Community Foundation manages the Charitable Gift Annuities for the Sisters. One may invest a minimum of \$10,000 to establish a Charitable Gift Annuity.

For more information on the Sisters of the Living Word Charitable Gift Annuity program please contact Margaret Mei, Director of Mission Advancement at 847-577-5972 ext. 226 or email [mmei@slw.org](mailto:mmei@slw.org).

## Sisters of the Living Word Charitable Gift Annuity Application Form Minimum \$10,000

### Donor(s)

1. Name(s) \_\_\_\_\_
2. Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
3. Telephone (     ) \_\_\_\_\_
4. Birth date(s) \_\_\_\_\_

### Person(s) to whom Life Income Payments are to be made

Single life OR first of two life income beneficiaries

5. Name \_\_\_\_\_
6. Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
7. Telephone (     ) \_\_\_\_\_
8. Birthday \_\_\_\_\_
9. Gift Annuity: Indicate preferred payment schedule: ( ) Quarterly ( ) Semi-annual ( ) Annual

### Form of Gift

10. ( ) Check Amount: \$ \_\_\_\_\_ Dated: \_\_\_\_\_, 2020.  
Please make checks payable to National Catholic Community Foundation
11. ( ) I prefer to donate stock. Please contact me.

### Request for Direct Deposit of Annuity (Life Income) Payments

12. Do you wish direct deposit? Yes ( ) No ( )

If yes, fill out bank name and attach a copy of a voided check where the deposit is to be made.

Bank Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Account number \_\_\_\_\_  
Authorization:  
Signature of Donor(s) \_\_\_\_\_ Date \_\_\_\_\_

**Return this application form to:** Margaret Mei, Director of Mission Advancement  
Living Word Center, 800 N. Fernandez #B, Arlington Heights, IL 60004