

# Endowed Giving Program Enrollment Form

Use this form to enroll in the Endowed Giving Program (“Endowed Program”), which allows Giving Account® Holders to support charitable organizations beyond their lifetime by enabling ongoing grants to up to six (6) charitable beneficiaries. A \$100,000 minimum Giving Account® balance is required at activation, which occurs at the death of the last remaining Account Holder. Refer to Fidelity Charitable Policy Guidelines: Program Circular for more information.

Type or print clearly in CAPITAL letters and black ink. If you need more room for information or signatures, make a copy of the relevant page.

I am participating in the Charitable Investment Advisor Program (CIAP) and, once enrolled in the Endowed Program, I recommend having my CIAP-qualified investment firm continue to manage the assets in the Endowed Program, at the time of Activation. I understand all investment firms participating in CIAP are subject to ongoing review and approval by Fidelity Charitable®.

## 1. Giving Account Number

Check one.  I am establishing a new Giving Account.  
 I currently have a Giving Account.

Giving Account Number									

## 2. Rename the Giving Account

Complete this section to change the Giving Account name upon Endowed Program activation. Typically, Account Holders choose a name in honor of themselves (e.g., “The Smith Family Memorial Fund”).

Giving Account Name									

## 3. Endowed Giving Program Duration and Annual Distribution Percentage

If no duration (term length) is stated, ongoing grants to charitable beneficiaries will continue in perpetuity. The term length will apply to ALL elected beneficiaries.

Term Length <small>Minimum 5 years</small>									

Total annual percentage (minimum 5%) of Giving Account balance to be distributed to recommended Endowed Giving Program Beneficiaries:

Total Annual %*									
									%

## 4. Endowed Giving Program Beneficiary Recommendations

Limit of six (6) charitable beneficiaries. Please use an additional sheet of paper if needed.

<b>Endowed Giving Program Beneficiary #1</b>								<small>% of Total Annual Distribution to Charity from Giving Account</small>	
Organization Name								Federal Tax ID Number <small>if known</small>	
Phone									

Endowed Giving Program Beneficiary Recommendations continues on next page. ►►

\*The Endowed Giving Program requires a minimum total annual distribution amount of 5% of the Giving Account balance or applicable IRS minimum percentage. If amounts distributed in a given year do not meet this minimum, Fidelity Charitable® will calculate and distribute the difference to the charitable grant recipients in the same proportion as recommended. Distribution calculations are based on the Giving Account balance as of December 31 of the prior calendar year.

**Mailing Address**

Address			
City	State/Province	ZIP/Postal Code	Country

Frequency of recurring grant:

*Check one.*  Semiannual  
 Annual

Anonymous grant:

*Check one.*  Yes  
 No

**Endowed Giving Program Beneficiary #2**

<small>% of Total Annual Distribution to Charity from Giving Account</small>	%
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This is my Alternate Beneficiary\*

*Check one.*  Yes  
 No

Organization Name		Federal Tax ID Number <i>if known</i>	
Phone			

**Mailing Address**

Address			
City	State/Province	ZIP/Postal Code	Country

Frequency of recurring grant:

*Check one.*  Semiannual  
 Annual

Anonymous grant:

*Check one.*  Yes  
 No

**Endowed Giving Program Beneficiary #3**

<small>% of Total Annual Distribution to Charity from Giving Account</small>	%
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Organization Name		Federal Tax ID Number <i>if known</i>	
Phone			

Endowed Giving Program Beneficiary Recommendations continues on next page. ►►

\*If you are recommending only one Endowed Program Beneficiary, you have the opportunity to also recommend an Alternate Beneficiary, in the case that your recommended beneficiary becomes ineligible. If you do not recommend an Alternate Beneficiary, or if the alternate becomes ineligible, the remaining Giving Account balance will be transferred to the Trustees' Philanthropy Fund.



**Mailing Address**

Address			
City	State/Province	ZIP/Postal Code	Country

Frequency of recurring grant:

- Check one.  Semiannual  
 Annual

Anonymous grant:

- Check one.  Yes  
 No

COMBINED TOTAL OF ENDOWED GIVING PROGRAM BENEFICIARY(IES) MUST EQUAL: 

Total	1	0	0	%
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**IMPORTANT NOTE: If you are also electing individual and/or IRS-qualified public charity successors (see Section 5 of Fidelity Charitable Donor Application), please ensure the combined total of your Successor Elections, including the Endowed Giving Program election, equals 100%.**

## 5. Signature and Date

By signing below, you:

- Acknowledge you have read *Fidelity Charitable Policy Guidelines: Program Circular* and agree to the terms and/or conditions described therein.
- Certify that grant recommendations made herein adhere to these guidelines and neither you nor anyone else will receive any more than incidental benefits from the recommended charitable organizations from these grants if distributed, and that these grants do not fulfill pre-existing legally enforceable pledges to the recommended charitable organizations.
- Understand that by establishing the Endowed Giving Program, the

Trustees do not intend to confer or constitute a contractual, trust, or other fiduciary relationship with participating Account Holders, grant recipient or any other person, and that the Trustees may modify, amend, or eliminate the Endowed Giving Program at any time.

- Understand that under the terms of the Endowed Giving Program, Fidelity Charitable® is specifically authorized to expend as much income and principal as the Trustees deem appropriate. See *Fidelity Charitable Policy Guidelines: Program Circular* for complete details.

Account Holder Name	
Account Holder Signature	Date MM DD YYYY
<b>SIGN</b> ▶	▶

**Did you sign the form and attach any necessary documents?**

Send form and any attachments to Fidelity Charitable.

**Questions?** Go to [FidelityCharitable.org](http://FidelityCharitable.org) or call 1-800-952-4438.

*Fax form to: 1-877-665-4274 If faxing this form, please do not also mail original.*

Mail the form to:

**Regular mail**  
 Fidelity Charitable  
 P.O. Box 770001  
 Cincinnati, OH 45277-0053

**Overnight mail**  
 Fidelity Charitable  
 100 Crosby Parkway KC1D-FC  
 Covington, KY 41015-9325

Fidelity Charitable is the brand name for the Fidelity® Charitable Gift Fund, an independent public charity with a donor-advised fund program. Various Fidelity companies provide services to Fidelity Charitable. The Fidelity Charitable logo is a service mark, and Fidelity Charitable and Fidelity are registered service marks, of FMR LLC, used by Fidelity Charitable under license. Giving Account is a registered service mark of the Trustees of Fidelity Charitable. 485201.5.0 (12/2012)





**Did you sign the form and attach any necessary documents?**

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