

Return completed forms to:

GLOBAL GIFT FUND

8888 Keystone Crossing Suite 1222 Indianapolis, IN 46240 Please use this form to contribute additional assets to your Global Gift Fund, a program of Renaissance Charitable Foundation Inc. donor-advised fund. Each additional contribution must have a fair market value of at least \$250. Checks should be made payable to Global Gift Fund. If you need assistance, please contact your financial advisor or call 866-301-0845.

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be made in cash or marketable securities nce Charitable Foundation Inc.)



MARKETABLE SECURITIES

Please complete the information requested below and follow the transfer instructions from your financial advisor for the following securities.

Name of security issuer			
Where security certificate is held			
Ticker/CUSIP	Account #	# of shares	
Name of security issuer			
Where security certificate is held			
Ticker/CUSIP	Account #	# of shares	
Name of security issuer			
Where security certificate is held			
Ticker/CUSIP	Account #	# of shares	
(Please attach additional marketable secur	rities information in the	e same format, if needed)	
OTHER ASSETS			
If you wish to contribute an asset othe		cly traded securities, please call	
the Foundation to discuss the review p	process.		
BROKER OR FINANCIAL	ADVISOR:		
Name:			
Name of Firm:			
Street Address:			
City/State/Zip:			
Phone Number: ()		_ Fax Number: ()	
E-mail Address:			



ACKNOWLEDGEMENT:

Mhe undersigned donor(s) (hereafter referred to in the fi rst person singular) makes an irrevocable and non-refundable gift for charitable purposes to Renaissance Charitable Foundation Inc. (the "Foundation"). By signing below, I hereby acknowledge that I have read the initial donor application (the "Application") and the Foundation's donor information circular entitled "Introducing the Global Gift Fund" (the

"Circular"), and I agree to the terms and conditions set forth in the Application and the Circular. I certify that, to the best of my knowledge, all information presented in connection with this Additional Contribution Form is accurate and agree to notify the Foundation promptly of any changes. I also understand that my capacity as a donor is advisory in nature and that the Foundation has the sole and exclusive authority and discretion to invest and disburse the property hereby transferred.

Donor #1 Signature:	Date:
Printed Name of Donor #1:	
Donor #2 Signature:	Date:
Printed Name of Donor #2:	

Please return this completed form to:

GLOBAL GIFT FUND, 8888 Keystone Crossing

Suite 1222 Indianapolis, IN 46240 or fax to 877-736-4620