



THE SAN DIEGO FOUNDATION
THE CENTER FOR CHARITABLE GIVING

Information Needed for a Crescendo Illustration
Charitable Remainder Annuity Trust

Person 1: _____
First M Last

Person 2: _____
First M Last

Birth Date(s)

Person 1: ___/___/___

Person 2: ___/___/___

Choose either:

- One Life Two Lives

Income Tax Bracket: _____

Proposed Gift Date: ___/___/___

Payout Frequency

- Monthly Quarterly Semi-annually Annually

Fair market value of asset: \$_____

Cost basis of the asset: \$_____

Additionally, it is helpful to know the following:

Approx current income: \$_____

Estimated trust earnings or return per year: \$_____

The fixed amount (a specified amount of 5% or more of the initial trust value) that the Trust will pay each year:

_____ %

Please call the Philanthropy Department at (619) 235-2300 to request an illustration.