



The (Partner Name) Co-Funded Grant  
Sample Gift Agreement

This "Gift Agreement" ("Agreement") is made by and between (Partner Name) and **Citizens United for Research in Epilepsy d/b/a CURE Epilepsy (CURE Epilepsy)**, an Illinois not-for-profit corporation. This Agreement will be part of CURE Epilepsy's permanent records and is intended to serve as a guide to those who will administer these funds in the future.

1. (Partner Name) hereby pledges to give to **CURE Epilepsy**, a gift in the amount of **\$55,000** to be paid in cash or readily marketable securities.
2. (Partner Name) will pay this pledge over a period of two years beginning in December 2023 and ending two years hence. Payments will be made as follows:

<u>Payment Due Date</u>	<u>Payment Amount</u>
December 31, 2023	\$5,000
December 31, 2024	\$25,000
December 31, 2025	\$25,000

Payments can be mailed to:

CURE Epilepsy  
PO Box 10472  
Chicago, IL 60610

Payments can also be made via ACH or wire transfer to:

CURE Epilepsy

**Bank Name:** XXX

**Bank Account Number:** XXX

**ACH Routing Number:** XXX

**Wire Routing Number:** XXX

(Partner Name) may accelerate the dates for making any or all payments on the pledge. Any unspent funds will be returned to (Partner Name) at the conclusion of the grant period including any no-cost extensions.

3. CURE Epilepsy will send reminders for pledge payments 30 days prior to payment due dates, as detailed above in paragraph 2.
4. This gift will be restricted to the Rare Epilepsy Partnership Award granted to (grantee name and institution).

5. All aspects of the funded project will be managed by CURE Epilepsy in accordance with the terms outlined in the grant agreement. CURE Epilepsy will prepare and submit regular reports summarizing the use of the gift to (Partner Name) until the project is completed. This will include an interim update on grant progress approximately 7 months into the project and a final full report approximately 12-18 months after the grant commences. CURE Epilepsy will also facilitate communication between the grantee and (Partner Name), including an introductory videoconference call. (Partner Name) will be alerted to any no-cost extensions given to the grantee.
6. In all communications, (Partner Name) will always state that this grant is funded, "In partnership with CURE Epilepsy." And CURE Epilepsy shall always state that this grant is funded, "In partnership with (Partner Name)." Each organization will also have access to each other's logos to use in any communications regarding the grant.

When there is a chance to say more in communications, e.g., give a little background for what CURE Epilepsy is, or if asked what the nature of the partnership is, the response is:

"CURE Epilepsy is the leading nongovernmental agency fully committed to funding research to find the cure for all epilepsies. CURE Epilepsy and (Partner Name) are joint partners, co-funding this research grant."

(Partner Name) may also use the standard language contained in the addendum to this agreement. CURE Epilepsy may also use the standard language for (Partner Name) in their communications, also contained in the addendum.

7. CURE Epilepsy acknowledges that in the event that the Institution or Investigator (grantee) is able to receive any consideration from third parties for the commercial development or use of the Results (e.g., option fees, license fees, royalties, milestone payments, etc.), then CURE Epilepsy will receive 10% of that consideration until such time as the cumulative aggregate of those payments to CURE Epilepsy equals three times the aggregate sums of the CURE Epilepsy Grant. In that instance, CURE Epilepsy will share 50% of these proceeds with (Partner Name) up to a cumulative aggregate of \$150,000.
8. This Agreement represents the entire agreement of the parties with respect to the (Partner Name) gift. It supersedes all prior proposals, discussions, and agreements, and may not be amended except by a written agreement signed by each of the parties hereto. This Agreement is governed by and will be construed in accordance with the laws of the State of Illinois.



In witness whereof, the parties have caused this Agreement to be executed by their duly authorized representatives effective as of the date of the CURE Epilepsy CEO signature below.

Donor Primary Contact:

Address:

(Partner Name):

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Date

CURE Epilepsy:

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Beth Lewin Dean, CEO

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Date

Please return this signed form to:

Alysha Biehl  
Senior Director of Development  
CURE Epilepsy  
Alysha.Biehl@cureepilepsy.org  
312-589-5578

## Addendum

### **Standard language to describe CURE Epilepsy**

CURE Epilepsy's mission is to find a cure for epilepsy by promoting and funding patient-focused research. Since its founding 25 years ago, CURE Epilepsy has raised over \$90 million to fund innovative studies to advance its goal of no seizures and no side effects. To date, CURE Epilepsy has funded more than 280 cutting-edge research projects in 17 countries around the world. As the non-profit leader in epilepsy research, CURE Epilepsy is unwavering in its commitment to fund scientific study and accelerate research to reach our goal – a world without epilepsy.

CURE Epilepsy inspires hope and delivers impact. To learn more, please visit us at [CUREepilepsy.org](https://cureepilepsy.org) or contact us at [info@cureepilepsy.org](mailto:info@cureepilepsy.org). You can also follow us on Facebook at @CUREforEpilepsy, and on Instagram, Twitter, TikTok, and LinkedIn at @CUREepilepsy.

### **Standard language to describe (Partner Name)**

To be provided by partner.