Grant Recommendation

Use this form to recommend a grant of \$100 or more from your donor-advised fund to support a public charity.

1 Account Information

Contact us with questions

Toll-free 1.800.810.0366 grants@iGiftFund.org

Fill-in PDF form available at www.iGiftfFund.org/forms

Account Number	Account Name							
Grant Amount: \$								
Charity Information								
Charity legal name			EIN if available					
Primary address or P.O. Box number								
City				State	Zip			
Web address			Preferred phone					
Grant Purpose								

Grant	Recognition		
	Full recognition Donor name & Fund name	Fund name only	Anonymous

Timing

Issue the approved grant on a recurring basis as indicated below for the amount listed above. (Note: recurring grants may halted due to an account's insufficient funds, or if notification to suspend is received.)						
Beginning (mm/dd/yyyy)	Ending (mm/dd/yyyy)	Semi-annual	Annual			

3 Acknowledgement of Terms

I understand that this is a recommendation. I further understand that the Independent Charitable Gift Fund (iGiftFund) reviews all grants to ensure that the organization is a qualified charity under IRS regulations, and that the purpose of the grant is charitable in nature. iGiftFund may deny a recommendation if the grant does not meet criteria for approval. By signing below, I acknowledge that this grant is not intended to:

- Fulfill an existing pledge. (An existing pledge is one made before this grant has been approved by iGiftFund.)
- Acquire more than an incidental benefit, good, or service for any specific individual or myself.
- Pay for dues, membership fees, tuition, goods from a charitable auction, or other goods or services.
- Support a political campaign or lobbying activity.
- Support an individual.
- Support a private non-operating foundation.

Primary Advisor

Date (mm/dd/yyyy)



4 Return this completed form by email, fax, or mail to: iGiftFund | grants@iGiftFund.org | Fax: 330.362.9925 5 E Main St, Hudson, OH 44236 | Phone: 1.800.810.0366