Donor Advised Fund Intake Form

Signatures are not required on this form. Once the information has been entered into our system, the donors will receive an email with instructions to access the iGiftFund portal and electronically sign the account documents through DocuSign.

CHOOSE A NAME FOR YOUR FUND

Choose a name that is meaningful to you (max 50 characters). This name will appear on your grant letters unless you change the recognition at the time of your grant recommendation.

FUND NAME

(Examples: Smith Family Charitable Fund or Doing Good Together Fund)

DONOR PRIMARY ADVISOR – DPA

The Donor Advisors (Donor Primary Advisor – DPA and Joint Advisor – JA) may provide non-binding advice to iGiftFund regarding grant recommendations, selection of the financial advisor and custodian, and the fund's succession plan.

FULL NAME	DATE OF BIRTH

EMAIL	PHONE NUMBER
	used for Two-Factor Authentication (2FA)

HOME ADDRESS

STREET		
CITY	STATE	ZIP

DONOR JOINT ADVISOR – JA

(Optional) ☐ No Joint Advisor

FULL NAME	DATE OF BIRTH

EMAIL	PHONE NUMBER
	used for Two-Factor Authentication (2FA)

HOME ADDRESS ☐ Same as DPA

STREET		
CITY	STATE	ZIP
RELATIONSHIP TO DPA		

SUCCESSION

Choose how you would like your charitable legacy to continue when the Donor Advisor(s) are no longer able or willing to manage the fund.

SUCCESSION PLAN OPTIONS

1 ☐ **Pass the fund to successor advisor(s).**

Appoint successor advisor(s) to continue recommending grants and carrying forward your charitable legacy through the existing fund.

A maximum of two successor advisors may be appointed to continue the existing fund. If your succession plans involve additional individuals or more complex arrangements, please select the Customized Disposition Plan option and contact iGiftFund
for more information.

2 ☐ **Create new funds for successor advisor(s).**

Divide the fund into separate donor advised funds for successor advisor(s), allowing each successor to continue your charitable legacy through their own fund.

Each successor fund must meet iGiftFund's minimum fund requirements in effect at the time the succession plan becomes effective. The current minimum is $25,000 per fund.

If you selected Option 1 or 2 above, please complete the Successor Advisor Details below. If additional space is needed for Option 2, attach additional pages.

SUCCESSOR ADVISOR 1

FULL NAME		DATE OF BIRTH	
EMAIL	PHONE NUMBER		
STREET			
CITY		STATE	ZIP
RELATIONSHIP TO DPA			

SUCCESSOR ADVISOR 2 (Optional)

FULL NAME		DATE OF BIRTH
EMAIL	PHONE NUMBER	
STREET		
CITY	STATE	ZIP
RELATIONSHIP TO DPA		

3 ☐ Establish recurring grants with an Endowment Plan.

Set up ongoing grants to selected charities while working with your Financial Advisor to create a sustainable giving strategy that can preserve your fund and provide ongoing support to the causes you care about in perpetuity.

Complete and submit the Endowment Plan Form to DonorSupport@igiftfund.org.

4 ☐ Recommend charitable organization(s) to receive final grant recommendations.

To help ensure final grant recommendations remain meaningful and impactful, the number of organizations should not exceed six. Please refer to the Program Description and Guidelines for additional information.

If additional space is needed, attach additional pages. Percentages must total 100%.

GRANTEE DETAILS: ORGANIZATION 1

LEGAL NAME OF CHARITY		EIN (if known)
STREET		
CITY	STATE	ZIP
PERCENTAGE	GRANT PURPOSE (if not specified, Unrestricted Gift will be used)	

RECOGNITION ☐ Donor Name & Fund Name ☐ Fund Name Only ☐ Anonymous

GRANTEE DETAILS: ORGANIZATION 2 (Optional)

LEGAL NAME OF CHARITY		EIN(if known)	
STREET			
CITY		STATE	ZIP
PERCENTAGE	GRANT PURPOSE (if not specified, Unrestricted Gift will be used)		

RECOGNITION ☐ Donor Name & Fund Name ☐ Fund Name Only ☐ Anonymous

GRANTEE DETAILS: ORGANIZATION 2 (Optional)

LEGAL NAME OF CHARITY		EIN(if known)	
STREET			
CITY		STATE	ZIP
PERCENTAGE	GRANT PURPOSE (if not specified, Unrestricted Gift will be used)		

RECOGNITION ☐ Donor Name & Fund Name ☐ Fund Name Only ☐ Anonymous

5 ☐ **Recommend a customized disposition plan.**

Recommend a customized disposition plan designed to reflect your charitable goals and legacy intentions. Contact iGiftFund for more information.

6 ☐ **I will provide my succession plan at a later date.**

We strongly encourage you to establish a succession plan as soon as possible to ensure your charitable intent is carried out.

FINANCIAL ADVISOR

The Financial Advisor listed below will manage the investment account for this fund. They may communicate directly with the donor(s) to guide investment strategy in accordance with iGiftFund's Statement of Investment Objectives and Guidelines. The Financial Advisor will have access to the donor portal to view funds they support and, based on the access level designated, may submit grant recommendations on the donor's behalf.

ACCESS LEVEL ☐ Read Only ☐ Full Access (may submit grant recommendations)

FINACIAL ADVISOR NAME	FIRM NAME
FINACIAL ADVISOR EMAIL	PHONE NUMBER
	used for Two-Factor Authentication (2FA)

STREET *(Firm Address)*		
CITY	STATE	ZIP

CUSTODIAN

(where the account will be held, e.g., Baird, LPL, Schwab)

LIQUIDITY CONTACT *(for liquidity funding requests)*

☐ Use Financial Advisor email listed above

☐ Use different email for liquidity requests:

EMAIL

INITIAL CONTRIBUTION

(Minimum $25,000)

ESTIMATED VALUE ($)

☐ Estimated Value of Initial Contribution

An investment account for the benefit of your fund will be established to receive assets. Please coordinate with your Financial Advisor to arrange funding of your account.

Pass-through contributions may be subject to additional fees. For details, please refer to the Program Description and Guidelines.

☐ Dry Fund/Testamentary Gift

The fund will be established without funding. An investment account will be opened once assets are contributed.

Change to Required Acknowledgments

The acknowledgments below are provided for informational purposes and will be included in the final DocuSign documents for review and signature. We encourage you to familiarize yourself with our Program Description and Guidelines are available on our website.

REQUIRED ACKNOWLEDGMENTS

iGiftFund is required to obtain, record, and verify identifying information for individuals associated with a fund in accordance with applicable regulations.

Contributions to a donor advised fund are irrevocable and become the property of the Independent Charitable Gift Fund.

Donor Advisors may recommend grants for charitable purposes; all grant recommendations are subject to review and approval by iGiftFund.

Funds may be subject to investment management fees and expenses separate from iGiftFund's administrative fees.

Grant recommendations must comply with applicable guidelines. Please refer to the Program Description and Guidelines for details on eligible and ineligible grant purposes.

iGiftFund reserves the right to modify the donor advised fund program in accordance with its governing policies.

By proceeding, you acknowledge that the information provided is accurate to the best of your knowledge.

No donor signatures are required on this intake form.

Once processed by our Gifts Team, the donor(s) will receive the required DAF documents via DocuSign and will be onboarded to the donor portal upon completion.
New Financial Advisors will receive portal onboarding instructions, while existing Financial Advisors will be notified by email when the Fund is established.

FORM COMPLETED BY

☐ Donor ☐ Financial Advisor

NAME	EMAIL