



Thank you for taking a few minutes to complete this form – your first step to make your giving easier, more strategic and more meaningful. Additional forms and brochures are available to be printed directly from our website at www.nptrust.org. If you need assistance filling out this form, please call us toll-free at **(888) 878-7900**.

1. Account Name

Choose a name for your Donor Advised Fund. You can name it for yourself, for your family (“The Smith Family Charitable Fund” for example), in memory of someone, or for a particular charitable purpose (“The Save the Rain Forests Fund”).

Account Name: _____

2. Donor Information

Identify all registered owners of the assets being donated. If the donor is a trust, enter the name of the trust agreement, the taxpayer identification number, and the date of the trust agreement directly below.

Trust (a completed **Certificate of Authority for Trusts** must accompany all initial gifts from trusts.)

Name of Trust Agreement: _____

Taxpayer Identification Number

_____-_____-_____
Trust Date (month, day, year)

Individual(s)

Mr./Mrs./
Ms./Dr./
Other _____
Primary Donor or Trustee (first, middle initial, last)

_____-_____-_____
Date of Birth (month, day, year)

Address: _____

_____-_____-_____
Social Security Number

City/State/Zip: _____

(____-____-____) _____-_____
Daytime Telephone Number

E-mail: _____

(____-____-____) _____-_____
Evening Telephone Number

Mr./Mrs./
Ms./Dr./
Other _____
Secondary Donor or Co-Trustee (first, middle initial, last)

_____-_____-_____
Date of Birth (month, day, year)

Address: _____

_____-_____-_____
Social Security Number

City/State/Zip: _____

(____-____-____) _____-_____
Daytime Telephone Number

E-mail: _____

(____-____-____) _____-_____
Evening Telephone Number

3. Gift Information

Refer to the instructions provided in **How to Make New or Additional Contributions**, or call National Philanthropic Trust toll-free at **(888) 878-7900** for assistance. The minimum contribution is \$25,000 to open a new donor advised fund account.

Cash

Dollar Amount \$ _____

<input type="checkbox"/> Check	Make payable to: National Philanthropic Trust Please mail to: National Philanthropic Trust 165 Township Line Road Suite 150 Jenkintown, PA 19046	<input type="checkbox"/> Wire	UBS AG ABA #: 026007993 A/C Title: UBS Financial Services A/C #: 101-WA-258641-000 F/C A/C Title: National Philanthropic Trust F/C A/C #: PY19422
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Securities

Important: If you are transferring securities attach a completed **Delivery Instructions for Securities** form. If you are transferring endorsed security certificates or securities, attach a completed **Letter of Authorization**.

Name of Security	Number of Shares	CUSIP or Symbol	Estimated Dollar Value

Mutual Fund Shares

Important: If you are transferring mutual funds, attach a completed **Letter of Authorization** with **medallion signature guarantee** and a recent account statement from your current institution.

Fund Company/Fund Name/Ticker	Number of Shares	Account Number

Donation from Other Private Foundation or Donor Advised Fund

Please identify the type of charitable organization/vehicle that will be the source of the donation.

Name of charitable organization/vehicle: _____

Type of charitable organization/vehicle: Private/Family Foundation Donor Advised Fund/Gift Fund

Estimated Dollar Amount: \$ _____

Bequest or Remainderment*

Check all boxes that apply to indicate how your gift will be made to National Philanthropic Trust upon your death.

- | | |
|---|---|
| <input type="checkbox"/> Bequest under a will. | <input type="checkbox"/> Distribution from an IRA, or 401(k) or other qualified plan. |
| <input type="checkbox"/> Distribution from a life insurance policy. | <input type="checkbox"/> Distribution from trust (e.g., charitable remainder trust). |
| <input type="checkbox"/> Other (please specify) _____ | |

* Please contact NPT for sample bequest language to name NPT as a charitable beneficiary of your will, qualified plan, insurance policy or trust.

4. Recommend an Investment Allocation

Recommend an asset allocation for your contribution by choosing Option 1, 2 or 3. Please review the respective strategy descriptions and investments before making your recommendation. Descriptions and performance information are available on the **Investment Descriptions & Options Form** which can be obtained from NPT's website www.nptrust.org.

<p>Option 1: Actively Managed Model Portfolios Utilizing best-in-class mutual funds, these actively managed strategies have the potential to out-perform the market.</p> <p><input type="checkbox"/> Money Market Portfolio (most conservative)</p> <p><input type="checkbox"/> Preservation Portfolio (conservative)</p> <p><input type="checkbox"/> Balanced Portfolio (moderate)</p> <p><input type="checkbox"/> Total Return Portfolio (moderate growth)</p> <p><input type="checkbox"/> Growth Portfolio (growth)</p> <p>Option 2: Index Fund Model Portfolios Utilizing low-cost exchange-traded funds, these strategies provide an economical way to achieve a comparable return to the market.</p> <p><input type="checkbox"/> Preservation Portfolio (conservative)</p> <p><input type="checkbox"/> Balanced Portfolio (moderate)</p> <p><input type="checkbox"/> Total Return Portfolio (moderate growth)</p> <p><input type="checkbox"/> Growth Portfolio (growth)</p>	<p>Option 3: Personal Giving Strategy Implement a customized giving strategy from among the following best-in-class mutual funds.</p> <p>_____ % Mainstay ICAP Select Equity</p> <p>_____ % Prudential Jennison Dryden</p> <p>_____ % Marsico 21st Century</p> <p>_____ % JP Morgan Mid Cap Value</p> <p>_____ % Victory Special Value</p> <p>_____ % Columbia Acorn Select</p> <p>_____ % Columbia Small Cap Value I</p> <p>_____ % JPMorgan Small Cap Equity</p> <p>_____ % Van Kampen Small Cap Growth</p> <p>_____ % JPMorgan International Value</p> <p>_____ % Federated International Small Company</p> <p>_____ % JPMorgan Emerging Markets</p> <p>_____ % Fidelity Advisors Emerging Markets</p> <p>_____ % Delaware Diversified Income</p> <p>_____ % Pioneer Global High Yield</p> <p>_____ % Jennison Dryden Global Real Estate</p> <p>_____ % UBS Select Prime Institutional Fund</p> <p>100%</p>
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5. Account Advisors and/or Successors

<p>Account Advisors: You may name individuals (such as your spouse, child, friend or others) as advisors to your account who will have the authority to recommend grants. Most donors act as their own advisors and do not need to be listed here. These individuals will not succeed the donors unless they are named as Account Successors.</p>	<p>Account Successors: You may name successors to the account to succeed you in advising on the account after the death of all of the original donors OR you can elect to have specific charities receive all or 5% annually of the remaining assets in the account.</p>
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<p>Mr./Mrs./ Ms./Dr./ _____ Other _____ Name (first, middle initial, last)</p> <p><input type="checkbox"/> Advisor Only <input type="checkbox"/> Successor Only <input type="checkbox"/> Advisor and Successor</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>E-mail: _____</p>	<p>_____ - _____ - _____ Date of Birth (month, day, year)</p> <p>_____ - _____ - _____ Social Security Number</p> <p>(____) _____ - _____ Daytime Telephone Number</p> <p>(____) _____ - _____ Evening Telephone Number</p>
<p>Mr./Mrs./ Ms./Dr./ _____ Other _____ Name (first, middle initial, last)</p> <p><input type="checkbox"/> Advisor Only <input type="checkbox"/> Successor Only <input type="checkbox"/> Advisor and Successor</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>E-mail: _____</p>	<p>_____ - _____ - _____ Date of Birth (month, day, year)</p> <p>_____ - _____ - _____ Social Security Number</p> <p>(____) _____ - _____ Daytime Telephone Number</p> <p>(____) _____ - _____ Evening Telephone Number</p>

Succession Plan Options: **Option A:** Retain assets in account, Successors will share account administration.
 Option B: Create new separate accounts, and divide assets equally among Successors.

6. Charitable Beneficiary(ies)

If you **DO NOT** elect to name successors to your account, indicate below your wishes for administration of the account upon the death of all of the original donors. You may choose one (1) of three (3) options:

- 1) Distribute all of the remaining assets in the account
- 2) Have 5% annually granted to a charitable organization(s)
- 3) Transfer the balance of account assets to the NPT Giving Fund

In the event that the recommended charity no longer exists, NPT will award grants to a charity whose mission is similar to the original charity.

Recommend: **Balance of the Account's Assets** **5% annually**

Name of Charitable Organization: _____

Address: _____

City/State/Zip: _____

____ - _____ (____) _____ - _____
Employer Identification Number (if known) Telephone Number

Contact Name

Recommend: **Balance of the Account's Assets** **5% annually**

Name of Charitable Organization: _____

Address: _____

City/State/Zip: _____

____ - _____ (____) _____ - _____
Employer Identification Number (if known) Telephone Number

Contact Name

Transfer balance of account assets to the NPT Giving Fund. The Fund supports charities selected by our Board of Trustees.

7. Acknowledgement of Terms (All donors or trustees named in **Section 2** must sign below)

I understand that my gift of the property described in **Section 3** are contributions to National Philanthropic Trust (NPT), a 501(c)(3) public charity, and is irrevocable and unconditional. I acknowledge that I have read the NPT Program Guide and agree to the terms and/or conditions contained therein. I certify that, to the best of my knowledge, all information enclosed is accurate and I will notify NPT in writing of any changes.

Donor Signature: _____ Date: _____

Donor Signature: _____ Date: _____

8. Referral Information (Please tell us how you learned of the Program)

- Advisor Attorney CPA Family/Friend
 News/Article Advertisement Website Other _____

9. Return this completed form and other required documentation to:

Mail: National Philanthropic Trust
165 Township Line Road, Suite 150
Jenkintown, PA 19046

Fax: (215) 277-3029