

## Donor-Advised Fund Update

Complete this form to update your donor-advised fund information. You can change the fund name, contact information, advisors or successors for an existing donor-advised fund. It is not necessary to enter information that has not changed. Additional forms are available at [www.IndependentGift.org](http://www.IndependentGift.org). If you need assistance, call toll free at (888) 878-7900 or send an email to [npt@nptrust.org](mailto:npt@nptrust.org).

### 1. Current Donor-Advised Fund Information

\_\_\_\_\_  
Donor-Advised Fund Name

\_\_\_\_\_  
Primary Advisor

### 2. Donor-Advised Fund Name Update

\_\_\_\_\_  
New Donor-Advised Fund Name

### 3. Primary Advisor Update

Any changes to the Primary Advisor's address will become your account's primary address for all correspondence unless otherwise noted.

Mr.  Mrs.  Ms.  Dr.

\_\_\_\_\_  
First Name, MI, Last Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Primary Telephone #

## 4. Joint, Secondary or Financial Advisor Update(s)

Update, delete or add an Advisor below. To indicate additional Advisor updates, attach a separate sheet.

**Update**    **Delete**    **Add** as a:    Joint Advisor    Secondary Advisor    Financial Advisor

Mr.    Mrs.    Ms.    Dr.

\_\_\_\_\_  
First Name, MI, Last Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Primary Telephone #

**Update**    **Delete**    **Add** as a:    Joint Advisor    Secondary Advisor    Financial Advisor

Mr.    Mrs.    Ms.    Dr.

\_\_\_\_\_  
First Name, MI, Last Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Primary Telephone #

**Update**    **Delete**    **Add** as a:    Joint Advisor    Secondary Advisor    Financial Advisor

Mr.    Mrs.    Ms.    Dr.

\_\_\_\_\_  
First Name, MI, Last Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Primary Telephone #

## 5. Successor Advisor or Charitable Beneficiary Update(s)

You may name individuals as Successor Advisors to succeed you in advising on the fund after the death of the Primary and Joint Advisors OR you may elect to name specific charities as the Charitable Beneficiaries of the funds. These recommendations may be changed at any time. In the event that a Charitable Beneficiary no longer exists, NPT will award grants to a charity whose mission is similar to the original charity. To indicate additional Successor Advisors or Charitable Beneficiaries, you may attach a separate sheet.

Update, delete or add either a Successor Advisor OR a Charitable Beneficiary below. To indicate additional Successor updates, attach a separate sheet. Before you make any changes please contact NPT to verify your current succession plan.

### A. Successor Advisor

Update    Delete    Add

Mr.    Mrs.    Ms.    Dr.

_____	_____	_____
First Name, MI, Last Name	Date of Birth	Social Security #
_____	_____	_____
Street Address	City/State	Zip
_____	_____	_____
Email	Primary Telephone #	

### B. Charitable Beneficiary

Update    Delete    Add as a Charitable Beneficiary

_____	_____	_____
Charity Name	% Annually	Lump Sum
_____	_____	_____
Street Address	City/State	Zip
_____	_____	_____
Email	Primary Telephone #	

## 6. Acknowledgement of Terms

I certify that, to the best of my knowledge, all information in connection with this form is accurate and I will notify NPT in writing of any changes.

\_\_\_\_\_  
Primary Advisor Signature

\_\_\_\_\_  
Date (month, day, year)

## 7. Return this completed form and other required documentation by mail or fax to:

National Philanthropic Trust | 165 Township Line Road, Suite 150 | Jenkintown, PA 19046 | Fax: (215) 277-3029