National Philanthropic Trust

Your partner in giving

Grant Recommendation

You may recommend a grant of $250 or more from your NPT Donor-Advised Fund to support a qualified public charity either by using this form or by logging on to the donor portal at nptgivingpoint.org and selecting *Recommend a Grant*.

If you need assistance, please call (888) 878-7900 or send an email to npt@nptrust.org.

1. Donor-Advised Fund Information

Donor-Advised Fund Name

Donor-Advised Fund Account Number

Primary/Joint/Additional Advisor

Prefix | First Name | MI | Last Name | Suffix

2. Select a Charity

Charity Name

Contact Name

Contact Number

Street Address

City

State

ZIP

Tax ID number (if known)

Phone

3. Choose Recognition Preference (please choose one)

NPT will include the following recognition information in the communication sent to the charity.

Recommended by:

- ☐ Fund Name & Donor Name(s) & Address
- ☐ Fund Name & Donor Name(s)
- ☐ Fund Name & Donor Address
- ☐ Fund Name
- ☐ Donor Name(s) & Address
- ☐ Donor Name(s)
- ☐ Donor Address Only
- ☐ Anonymous

You may also indicate others to be acknowledged with this grant, regardless of the recognition choices made above.

☐ In honor of

☐ In memory of

☐ In recognition of

☐ Solicited by

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4. Grant Amount – Indicate the amount of the grant that the organization is to receive.

Amount ($250 minimum)

5. Select Grant Frequency (please choose either one-time or recurring)

☐ **One-time grant**

The grant will be sent as soon as administratively feasible unless an alternative date is entered below.

Grant date (month/day/year)

☐ **Recurring grant** (please select recurring timing)

☐ Monthly ☐ Quarterly ☐ Semi-annually ☐ Annually

Required: Beginning date

Required: End date

6. Purpose of Grant (please choose one)

If no grant purpose is selected, the grant purpose will be defaulted to *Where needed most.* ***Asterisk options require additional information.**

☐ Annual Giving
☐ Annual Tithe
☐ General Support
☐ Monthly Giving
☐ Monthly Tithe
☐ Quarterly Giving
☐ Quarterly Tithe
☐ Refugee Support
☐ Tithe
☐ Unrestricted Gift
☐ Where Needed Most
☐ Zakat

☐ Event support* (no benefits, not attending)
A gift to provide general underwriting support for an event of the grantee. Please provide (i) the name of the event, and (ii) confirm that no portion of the gift will be applied toward the purchase of tickets for the event, raffle tickets or auction items.

Name of Event

☐ I confirm no portion of the gift will be applied toward the purchase of event tickets, raffle tickets or auction items.

☐ Fundraising run, walk, etc.*
A gift to the grantee in support of the fundraising efforts of an individual or team, typically for an organized race or similar event. Grant funds must be used for the grantee's charitable purposes and may not be used to defray any costs that are the responsibility of the individual or team.

Event Name and, if applicable, Team/Participant Name

☐ Named scholarship*
Please provide (i) the name of the fund you wish to support, and (ii) whether any donor/advisor to the DAF or any of their family members is involved in the selection of the scholarship recipients.

Name of Scholarship Fund Being Supported

Is any donor/advisor to the DAF or their family members involved in the selection of scholarship recipients?

☐ Yes ☐ No

☐ Other purpose not listed*
Please list the other purpose and provide a brief description.

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7. Acknowledgement of Terms

If I am the primary or joint advisor, I represent and warrant the following about my grant recommendation; or if I am not the primary or joint advisor, I represent and warrant that I am authorized to make the following representations on behalf of the primary and joint advisor:

- The grant will directly and fully support a charitable program.
- The grant will not pay for attendance at a charitable event (e.g. gala, luncheon, golf outing, auction).
- The grant will not pay for goods/services or any other benefit for myself or any specific individual (e.g. auction item, membership fee, dues, tuition).
- The grant will not be used to support a political campaign or lobbying activity.
- The grant will not support a private non-operating foundation.
- The donor received a charitable deduction upon contributing assets to the donor-advised fund and no one will claim an additional deduction for this grant.

By signing below, I acknowledge my understanding that I am submitting a recommendation and not a direction, and that my recommendation is not legally binding on National Philanthropic Trust (NPT). I acknowledge that NPT retains exclusive legal control over contributed assets. I further acknowledge that I have read NPT's ***A Guide to Your Donor-Advised Fund*** and agree to the terms and/or conditions contained therein. I certify that, to the best of my knowledge, all information in connection with this recommendation is accurate or I will notify NPT in writing of any changes.

If I selected a recognition option other than "Anonymous," I acknowledge that by selecting the recognition option above, I am hereby giving NPT permission to share with the recommended grantee the name of my donor-advised fund, my name and/or my address, as indicated above.

If I am a financial advisor, I further attest that I am submitting this grant recommendation on behalf of my client and with the full authority for my client, and I understand a notice via email will be sent to the primary advisor on this donor-advised fund account.

_____

Primary/Joint/Additional/Financial Advisor Signature

_____ _____

Print Name Date (MM/DD/YYYY)

RETURN THIS COMPLETED FORM BY EMAIL OR MAIL TO: National Philanthropic Trust
2 Ash Street, Suite 3000, Conshohocken, PA 19428 | npt@nptrust.org

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