



# Grant Recommendation

Complete this form to recommend a grant of \$250 or more from your NPT Donor-Advised Fund to support a qualified public charity.

If you need assistance or additional forms, please call (888) 878-7900 or send an email to [npt@nptrust.org](mailto:npt@nptrust.org).

## 1. Fund Information

Donor-Advised Fund Name

Donor-Advised Fund Account Number

Primary/Joint/Secondary Advisor (First Name, MI, Last Name)

## 2. Charity

Charity Name

Contact Name

Contact Number

Street Address

City/State

Zip

Tax ID number (if known)

Primary Telephone Number

## 3. Purpose of Grant (please choose one)

Unrestricted (default if not checked)

Alumni fund

Annual support

Building fund

Capital campaign

General support

General scholarship support

Individual or team fundraising

Missionary support

Named scholarship support

Tithe

Underwrite charity event (no benefits, not paying for attendance, raffle or auction)

Other

## 4. Grant Amount

Indicate the amount of the grant that the organization is to receive.

\$

Amount (\$250 minimum)

## 5. Grant Frequency

### One-time grant

The grant listed on the previous page 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 (month/day/year)

\_\_\_\_\_  
Required: end date (month/day/year)

## 6. Grant Recognition

Indicate how the grant should be acknowledged when the check is issued to the recipient organization.

Recognize donor-advised fund name and donor(s)

Anonymous

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

In honor of \_\_\_\_\_

In name of \_\_\_\_\_

In memory of \_\_\_\_\_

In gratitude \_\_\_\_\_

## 7. Acknowledgement of Terms

I understand that this is a recommendation and not a direction. I further understand that National Philanthropic Trust (NPT) 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. NPT may deny a recommendation if the grant does not meet criteria for approval. By signing below, I acknowledge each of the following statements:

- My grant directly and fully supports a charitable program.
- My grant does not pay for attendance at a charitable event (e.g., luncheon, golf outing).
- My grant does not pay for attendance or goods/services at a charitable auction.
- My grant does not pay for membership fees, dues, tuition or any other benefit.
- My grant does not support a political campaign or lobbying activity.
- My grant will not provide a more than incidental benefit, good or service to myself or any specific individual.
- My grant does not support a private non-operating foundation.
- I received a charitable deduction when I established my donor-advised fund and cannot claim any additional deductions for this grant.

\_\_\_\_\_  
Primary/Joint/Secondary/Financial Advisor Signature

\_\_\_\_\_  
Date

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

National Philanthropic Trust | 165 Township Line Road, Suite 1200 | Jenkintown, PA 19046

Fax: (215) 277-3029 | npt@nptrust.org