



# 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 logging on to the donor portal at [nptdaf.org](http://nptdaf.org) and selecting *Recommend a Grant*.

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

Donor Name(s) & Address

Fund Name & Donor Name(s)

Donor Name(s)

Fund Name & Donor Address

Donor Address Only

Fund Name

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

#### 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)

Unrestricted (default if not checked)

Alumni fund

Annual support

Building fund

Capital campaign

General support

Other

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)

#### 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.

## 7. Acknowledgement of Terms (continued)

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 Donor Primary Advisor on this account.

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Primary/Joint/Additional/Financial Advisor Signature

Print Name

Date (MM/DD/YYYY)

**RETURN THIS COMPLETED FORM BY EMAIL, FAX OR MAIL TO: National Philanthropic Trust**

165 Township Line Road, Suite 1200, Jenkintown, PA 19046 | Fax: (215) 277-3029 | [npt@nptrust.org](mailto:npt@nptrust.org)