

# Donor Advised Fund Application

Thank you for your interest in establishing a Donor Advised Fund with the Community Foundation for Southeast Michigan and for providing the information below. After completing this form, please return it to the Community Foundation. You can email the form to [pservices@cfsem.org](mailto:pservices@cfsem.org). With the information provided, we can complete your fund agreement.

## DONOR/FOUNDER INFORMATION

Today's Date \_\_\_\_\_

Donor/Founder 1:

Mr./Mrs./Ms. \_\_\_\_\_

Name of business (if corporate fund) \_\_\_\_\_

Address \_\_\_\_\_

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

Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth (optional) \_\_\_\_\_

Donor/Founder 2:

Mr./Mrs./Ms. \_\_\_\_\_

Name of business (if corporate fund) \_\_\_\_\_

Address \_\_\_\_\_

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

Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth (optional) \_\_\_\_\_

## FUND NAME

You may propose a name for this donor advised fund. Fund names typically do not include the words "Foundation" or "Trust" unless that is part of the legal name of the entity establishing the fund.

Proposed name of fund: \_\_\_\_\_ Fund

The Community Foundation lists names of funds in its Yearbook (annual report) unless otherwise indicated. Only the name of the fund is listed. Do you want this fund listed in the Community Foundation Yearbook? (Please check one.)

Yes, I would like this fund listed in the Community Foundation Yearbook.

No, I prefer to be anonymous. Do not list this fund in the yearbook.

## Donor Advised Fund Application

### ANONYMITY

Grants from the fund are accompanied by an award letter to acknowledge the name of the donor and their donor advised fund who recommended the grant. If anonymity is preferred, please check a box below. If neither box is checked, individual grants can be marked anonymously at the time of submission.

- Please only list my fund name, excluding my individual name
- Please make all grants completely anonymous, excluding my individual name and my fund name

### DONORCENTRAL

DonorCentral is an online service provided to donor advisors. This online tool allows you 24-hour access to view your fund information and permit you to make online grant recommendations. When establishing a new fund, you are automatically enrolled to access this online service. You will receive a welcome email sent to the email address provided once the fund is established. Please confirm your email address or indicate if you wish to opt out of this free service.

- Confirm email address \_\_\_\_\_
- I do not want access to view my fund activity online.

### Quarterly Statements

DonorCentral gives you access to view your quarterly statements online. If you wish to also receive a hard copy in the mail, please check the box below.

- I would like to receive a hard-copy of my statements in the mail

### ADVISORS TO THE FUND

Please list the initial advisor(s) to the fund (if different than founder(s)).

Mr./Mrs./Ms. \_\_\_\_\_

Address \_\_\_\_\_

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

Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Mr./Mrs./Ms. \_\_\_\_\_

Address \_\_\_\_\_

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

Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

# Donor Advised Fund Application

## SUCCESSOR ADVISORS TO THE FUND

If any, please name the successor advisors to this fund. Advisors can represent two generations of a family (usually, the founder and the founder’s children). For non-family situations, please contact the Community Foundation about successor advisors.

Successor advisors to serve (check one):

concurrently       consecutively (if consecutively, list in order of succession)

1 Mr./Mrs./Ms. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_  
 Email \_\_\_\_\_ Relationship to Donor \_\_\_\_\_  
 Do not contact or involve at this time

2 Mr./Mrs./Ms. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_  
 Email \_\_\_\_\_ Relationship to Donor \_\_\_\_\_  
 Do not contact or involve at this time

3 Mr./Mrs./Ms. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_  
 Email \_\_\_\_\_ Relationship to Donor \_\_\_\_\_  
 Do not contact or involve at this time

4 Mr./Mrs./Ms. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone: Business \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_  
 Email \_\_\_\_\_ Relationship to Donor \_\_\_\_\_  
 Do not contact or involve at this time

# Donor Advised Fund Application

## ENDOWED OR NONENDOWED FUND

Please indicate whether you wish this fund to be an endowed fund or a nonendowed fund. *Note: A nonendowed fund can be converted to an endowed fund at any time. However, an endowed fund cannot later become nonendowed.*

- Endowed Fund:** A permanent fund through which grants are made using a percentage of the fund as determined annually by the Board of Trustees. All endowed donor advised funds are invested in the Community Foundation's endowment pool.
- Nonendowed Fund:** A fund in which the entire value of the fund is available for grantmaking.

## FOR NONENDOWED FUNDS ONLY: RECOMMENDED INVESTMENT STRATEGY

Nonendowed donor advised funds are invested in one of five investment strategies. Please contact our Philanthropic Services department for more information regarding options or indicate which investment you recommend. (choose only one).

- Money Market
- Conservative
- Balanced – Default Allocation
- Growth
- All Equity

Note: Donor advisors with either endowed or nonendowed funds in excess of \$1 million may request approval to utilize a custom investment manager and strategy.

## YOUR SIGNATURE

Please sign and date:

Founder 1 \_\_\_\_\_ Date \_\_\_\_\_

Founder 2 \_\_\_\_\_ Date \_\_\_\_\_

**Thank you. We look forward to working with you.**

**Community Foundation**

FOR SOUTHEAST MICHIGAN

333 W. Fort Street Suite 2010 Detroit, MI 48226-3134

Phone: 313.961.6675 Fax: 313.961.2886

[www.CFSEM.org](http://www.CFSEM.org)

# Donor Advised Fund Application

Optional Information

Donor/Founder 1 Name

## PROFESSIONAL ADVISOR INFORMATION

Please provide the contact information for your professional advisor(s).

### Accountant:

Mr./Mrs./Ms. \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

- You may discuss my fund with this person
- This person is allowed view-only access on DonorCentral

### Attorney:

Mr./Mrs./Ms. \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

- You may discuss my fund with this person
- This person is allowed view-only access on DonorCentral

### Financial Advisor:\*

Mr./Mrs./Ms. \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

- You may discuss my fund with this person
- This person is allowed view-only access on DonorCentral

# Donor Advised Fund Application

Optional Information

Donor/Founder 1 Name

## PROFESSIONAL ADVISOR INFORMATION, CONTINUED

\*If your financial advisor is registered with American Funds, please provide the following information:

Broker Dealer Name \_\_\_\_\_

Branch Name/Number \_\_\_\_\_

Branch Address \_\_\_\_\_

Branch Manager Address \_\_\_\_\_

Advisor/Broker Registered Representative Number \_\_\_\_\_

Please note that the American Fund may provide compensation to a financial advisor whose client establishes or maintains a donor advised fund with the Community Foundation for Southeast Michigan. However, that compensation is within sole control of American Funds and is netted from the stated investment fee and, as such, does not result in an additional fee or charge to the donor advised fund.

How did you hear about the Community Foundation Donor Advised Fund program?

- |  |   |
|--|---|
| <input type="checkbox"/> Attorney      | <input type="checkbox"/> Friend or family member      |
| <input type="checkbox"/> Accountant    | <input type="checkbox"/> Financial Advisor/Planner    |
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Community Foundation website |
| <input type="checkbox"/> Other         |   |

## AREAS OF CHARITABLE INTEREST

While you are not required or restricted to support these areas, please check the types of charities that you would generally support (check all that apply):

- |  |   |
|--|---|
| <input type="checkbox"/> Arts and Culture                    | <input type="checkbox"/> Health         |
| <input type="checkbox"/> Environment                         | <input type="checkbox"/> Human Services |
| <input type="checkbox"/> Education                           | <input type="checkbox"/> Public/Society |
| <input type="checkbox"/> Other (please name) _____           |   |
| <input type="checkbox"/> I have no specific area of interest |   |