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| Logo - Black & White | **The Cleveland Foundation**  Lifetime Creation of a Donor Advised Fund |

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| **SECTION 1: Transfer; Name of Fund** |

This document covers an irrevocable transfer of the property described below by the Donor(s) to the Cleveland Foundation. The Foundation is an Ohio public benefit corporation recognized for federal tax purposes as a charity.

The gift and any additions to it and all its increments, proceeds, investments, and reinvestments shall comprise a new Fund of the Foundation named as follows:

Name of Fund:

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| --- |
| **SECTION 2: Donor Information** |

|  |  |  |
| --- | --- | --- |
| **Donor 1** |  | **Donor 2** |
| Name |  | Name |
| Mailing Address |  | Mailing Address |
|  |  |  |
| City State Zip |  | City State Zip |
| Home Phone Number |  | Home Phone Number |
| Other Phone Number |  | Other Phone Number |
| Email Address |  | Email Address |
| Company Name |  | Company Name |

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| --- |
| Correspondence (including periodic statements) should go to [*Check One*]:  🞎 Donor 1 🞎 Donor 2 🞎 Both |

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| **SECTION 3: Optional Donor Information** |

While the following information assists the Foundation in working with you, it is your option whether to disclose your advisor(s).

*Please provide information below on any advisor(s) with whom you work:*

|  |  |  |
| --- | --- | --- |
| Name |  | Name |
| Company or Firm Name |  | Company or Firm Name |
| Address |  | Address |
|  |  |  |
| City State Zip |  | City State Zip |
| Phone Number ( ) |  | Phone Number ( ) |
| 🞎 Attorney 🞎 CPA 🞎 Financial Planner 🞎 Other |  | 🞎 Attorney 🞎 CPA 🞎 Financial Planner 🞎 Other |

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| **SECTION 4: Annual Grants** |

Donors may recommend to the Foundation grants in aggregate annual amounts according to the spending policy in place at the Cleveland Foundation from time to time.

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| **SECTION 5: Advisors** |

The following provisions govern which Advisors are permitted to recommend grants from the Donor Advised Fund you are establishing. [*Check One*]:

🞎 The Donor(s) shall be the sole Advisor(s).

🞎 The Advisors shall be the Donor(s) and the following individuals: *Please complete one or more sections below to name individual(s) in addition to you who are permitted to recommend grants from your Donor Advised Fund*.

|  |  |  |
| --- | --- | --- |
| **🞎 Concurrent Advisor\* 🞎 Successor Advisor\*\*** |  | **🞎 Concurrent Advisor\* 🞎 Successor Advisor\*\*** |
| Name |  | Name |
| Mailing Address |  | Mailing Address |
|  |  |  |
| City State Zip |  | City State Zip |
| Home Phone Number |  | Home Phone Number |
| Other Phone Number |  | Other Phone Number |
| Relationship to Donor(s) |  | Relationship to Donor(s) |
|  |  |  |

\* Concurrent advisor is authorized to recommend, with or in addition to Donor(s), grants during a Donor(s)'s  
 lifetime.  
\*\* Successor advisor is authorized to recommend grants following the Donor(s)'s lifetime, or in the event the  
 Donor is incapable of doing so.

*If there are additional Advisors, attach Advisors names and information on Exhibit I.*



The designation of an Advisor may be revoked only in writing signed by the Donor(s).

The Advisor(s) from time to time shall consult with Foundation staff and make recommendations concerning the amounts, timing, and purposes of grants from the Fund. All recommendations shall be made in documents signed by the (an) Advisor and delivered to the Foundation. The Foundation shall have no duty to inquire whether the recommendations have the proper authorization by any other Advisor(s).

The Foundation may make grants from the Fund as if there were no provision for Advisors: (i) if and so long as the Advisor(s) from time to time serving fail(s) to make recommendations in a timely manner under the distribution policies of the Foundation; (ii) while no Advisor is serving; and (iii) after all designated Advisors have resigned or otherwise ceased to serve. In these circumstances, Donor(s) request(s) that grants attributable to the Fund be made for the following purposes of the Foundation [*Check Preferences*]:

|  |  |
| --- | --- |
| 🞎 Unrestricted Charitable Purposes | 🞎 Community Development |
| 🞎 Economic Development | 🞎 Arts & Culture |
| 🞎 Education | 🞎 Social Services |
| 🞎 Scholarships | 🞎 Health |

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| **SECTION 6: Disclosures and Communications** |

*Check One*

🞎 The Foundation may provide the name of the Fund to recipient(s) of grants attributable to the Fund and publish the name(s) of Donor(s) and the Fund in its Annual Report.

🞎 The names of the Donor(s) and the name of the Fund shall remain anonymous.

*Please initial one or both lines, if desired:*

\_\_\_\_\_ The Foundation is authorized to use of the name(s) of the Donor(s) and the Fund in publications of or concerning the Foundation, such as newsletters, articles, solicitation brochures, and other materials developed by or for the Foundation's Gift Planning and Donor Relations Team.

\_\_\_\_\_ The Foundation may contact Donor(s) to discuss informational or promotional opportunities featuring Donor(s).

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| **SECTION 7: Description of Property Contributed** |

Type of property contributed:

|  |  |  |
| --- | --- | --- |
| Cash | Bonds | Other |
| Stocks | Mutual Funds |  |

*Please provide a detailed description of the property contributed on Exhibit II.*

Check(s) or wire transfer(s) $ \_\_\_\_\_\_\_\_\_\_\_. Checks should be payable to: The Cleveland Foundation. *Call 216.861.3810 and ask for the Gift Planning Associate for information concerning wire transfers and transfers of securities.*

|  |  |  |
| --- | --- | --- |
| *For stocks, bonds and other securities, please provide information below:* | | |
| Brokerage Firm |  | Brokerage Firm |
| Financial Advisor |  | Financial Advisor |
| Financial Advisor's Phone Number |  | Financial Advisor's Phone Number |
|  |  |  |
| **SECTION 8: Investment Management** | | |

# The Foundation shall have exclusive control over the investment, reinvestment, and management of assets comprising the Fund. Donor(s) may express Donor(s) preference for the initial investment option or investment manager for the Fund by completing Exhibit III. Donor(s) acknowledge(s) that any preference expressed is advisory only and that the Foundation may change, add, or dismiss investment options and investment managers from time to time. If the Donor(s) do(es) not indicate a preference, the Foundation shall select a TCF Pool, an investment firm, or bank.

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| **SECTION 9: Governance of Fund** |

The Fund is subject to the governing instruments of the Cleveland Foundation, its variance power, and its policies in effect from time to time, including without limitation, policies about the maintenance and duration of a fund. Grants, expenditures, and fees shall be paid from the Fund in accordance with the spending and other policies and procedures of the Foundation in effect from time to time, including the rule fixing minimum permissible single distributions.

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| **SECTION 10: Signatures** |

The gift described is an irrevocable transfer by and is not refundable to the Donor(s). Donor(s) has (have) read and understand(s) the publication *Guidelines for Establishing a Fund* and accept(s) its terms and conditions.

|  |  |
| --- | --- |
| **Donor 1 Signature** | **The Cleveland Foundation** |
|  |  |
|  |  |
|  | Name: |
|  | Title: |
|  |  |
| Date: | Date: |
|  |  |
|  | *Accepted with thanks* |
|  |  |
| **Donor 2 Signature** |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Date: |  |

**Advancement Team**

The Cleveland Foundation

1422 Euclid Avenue, Suite 1300, Cleveland, OH 44115

Phone: 216.861.3810 Toll Free: 877.554.5054 Fax: 216.861.6754

Email: [giftplanning@clevefdn.org](mailto:giftplanning@clevefdn.org)



Exhibit I

**Additional Advisors**

Exhibit II

**Detailed Description of Property Contributed**

Exhibit III

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Preference for Investment Management.** Donor(s) prefer that the investment management for the Fund initially be handled as follows. If the Donor(s) do(es) not indicate a preference, the Foundation 0 shall select a TCF Pool, an investment firm, or bank. **[*Check One*]**  ***In-house Investment Options:***   |  |  | | --- | --- | | TCF Flagship Pool  TCF Growth Pool  TCF Balanced Pool | | | TCF Socially Responsible Investment Pool | | |  | | | ***Firms and Banks:*** | | |  | | | Baird Asset Management | McDonald Partners | | BDS Financial Services | Merrill Lynch | | Carnegie Investment Counsel | PNC | | Cedar Brook Financial Partners, LLC | UBS Financial Services | | Fairport Asset Management, LLC | U.S. Bank, NA | | Glenmede Trust Co., NA | Wells Fargo | | Hartland & Co. | Winfield Associates | | Huntington National Bank | Other | | JPMorgan Chase Bank, NA |  | | KeyBank |  | |  |  | |  |
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