**Choose one\***

Establish a New Fund

Update Fund Information

**Name of Fund\***

Click or tap here to enter text.

e.g. O Hill Family Fund or ABC Corporate Fund (Name must end with “Fund”)

**DONOR ADVISOR** **Donor Advisor:** has full advisory privileges over a fund, including grant recommendations, investment recommendations, naming of naming investment advisors and successors.

Mr. Ms. Mrs. Dr.

Click or tap here to enter text.

First Name\* Last Name\*

Click or tap here to enter text.

Email\*

Click or tap here to enter text.

Phone #\*

Click or tap here to enter text.

Mailing Address (*optional*)Business Home

Click or tap here to enter text.

City State Zip

Click or tap here to enter text.

LinkedIn Handle (*optional*)

Click or tap here to enter text.

Instagram Handle (*optional*)

**FUND CREATION**

Initial gift to establish a fund: $ Click or tap here to enter text.

Check made payable to Investors Philanthropic

**Gifts**:

Wire

Publicly Traded Securities

Privately Held Securities

Restricted Securities

Real Estate

Other

PLEASE DESCRIBE THE GIFT (INTERFUND TRANSFER, CREDIT CARD, PERSONAL PROPERTY, REAL ESTATE, TESTAMENTARY):

Click or tap here to enter text.

**Total Contribution**: $Click or tap here to enter text.

**PLANNED GIFTS**

I have remembered Investors Philanthropic in my estate plans

I would like more information on how to include Investors Philanthropic in my estate plans

**PRIMARY CONTACT** *(optional)*

Mr. Ms. Mrs. Dr.

Click or tap here to enter text.

First Name\* Last Name\*

Click or tap here to enter text.  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\*  
 Click or tap here to enter text.

Phone #\*

**INVESTMENT ADVISOR** *(optional)*

**Investment Advisor**: has full advisory privileges over investment recommendations but no other fund administration advisory privilege

Mr. Ms. Mrs. Dr.

Click or tap here to enter text.

First Name\* Last Name\*

Click or tap here to enter text.

Title

Click or tap here to enter text.

Email\*

Click or tap here to enter text.

Phone #\*

Click or tap here to enter text.

Mailing Address (*optional*) Business Home

Click or tap here to enter text.

City State Zip

**GIFTING ADVISER**

**Gifting Adviser**: has full advisory (or Donor-specified) privileges over gifting. Donors may name a maximum of three Gifting Advisors.

Mr. Ms. Mrs. Dr.

Click or tap here to enter text.

First Name\* Last Name\*

Click or tap here to enter text.

Title

Click or tap here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Email\*

Click or tap here to enter text.

Phone #\*

Click or tap here to enter text.

Mailing Address (*optional*) Business Home

Click or tap here to enter text.

City State Zip

**RECOGNITION AND THANKS**

**How would you like to be recognized?**

Your selected Donor Advised Fund name will appear prominently on checks for grants to your selected charities, from your account, unless anonymity is requested.

Your Fund’s name will also be included on a grant transmittal letter which may also at your discretion, reference specific naming or gift recognition agreements and/or understandings with your selected charities including schools, universities, the arts, hospitals, libraries and religious organizations all of which must be IRS approved 501(c)(3) nonprofit entities.

Click or tap here to enter text.

e.g. Mr. and Mrs. John Doe, Jane and John Doe, The Doe Family, ABC Corporation)

Please make all grants from the fund anonymous.

(*Note: anonymity can be customized on a grant-by-grant basis.)*

**How would you like to be thanked by nonprofits?**

An organization that has received grants from the fund may wish to send information to you directly. Please indicate your preference.

Choose one:

Provide my email address.

Provide my business address.

Provide my home address.

Send thru Investors Philanthropic

Do not provide my information.

**INVESTMENT OPTIONS\***

Please refer to the attachments regarding investment pool information and allocation.

I have completed the Investment Allocation form.

I have named a Registered Investment Advisor.

If you need additional information, please contact: Valentina, Investors Philanthropic Managing Director valentina@joyofgiving.org.

**ACKNOWLEDGEMENT AND SIGNATURES**

I have read Investors Philanthropic's Policies andGuidelines, Fund Terms and Conditions and agree to the fees, terms and conditions described. I understand that any contribution to Investors Philanthropic, represents an irrevocable gift to Investors Philanthropic, whose Board of Directors has variance power under IRS regulations. However, I understand that as a “Donor Adviser ” I have the right to advise Investors Philanthropic on gifts and investments on the contributions I make to Investors Philanthropic.

I hereby certify, to the best of my knowledge, that all information presented in connection with this form is accurate, and I will notify Investors Philanthropic promptly of any changes.

Click or tap here to enter text.

Primary Fund Advisor Signature\*

Click or tap here to enter text.

Print Name\* Date\*

Click or tap here to enter text.

Investors Philanthropic Signature

Click or tap here to enter text.

Print Name\* Date\*

Click or tap here to enter text.

Title

**Please email this application to:**

valentina@joyofgiving.org

Or mail to:

Investors Philanthropic

One Upper Newport Plaza Drive

Newport Beach, California 92660

For any questions please contact:

Valentina directly at 949.251.2010

Please visit:

www.joyofgiving.org