

# Donor Advised Fund

Forms Booklet

The **U.S.**  
CHARITABLE  
GIFT TRUST®

**Offered through The U.S. Charitable Gift Trust®**

A simplified and tax-advantaged approach to charitable giving.  
Sponsored by Eaton Vance.

## Charitable Giving Made Easy

The U.S. Charitable Gift Trust<sup>®</sup> (“The USCGT”), sponsored by Eaton Vance, is a tax-exempt public charity, approved by the IRS, that receives donations from individuals, corporations and others and makes gifts to qualified charities throughout the United States.

Through its Donor Advised Fund and Pooled Income Funds, The USCGT offers you the opportunity to manage your philanthropic interests and goals through one simple, straightforward vehicle and provides you with cost efficiencies and investment diversification that is not possible with individual planned gifts. Moreover, The USCGT platform will provide you with many of the same advantages as a private foundation but without the complexity and the cost.

## Donor Advised Fund Gifting Guide

In the sections below, we have provided instructions for various forms of acceptable gifts to The U.S. Charitable Gift Trust®. If you do not see your gift type listed or have any questions, please contact our Trustee, Wilmington Trust Retirement & Institutional Services, at 1-800-664-6901.

TYPES OF GIFTS:	
The following are generally acceptable gifts to The U.S. Charitable Gift Trust:	
<b>Cash</b>	<ul style="list-style-type: none"> <li>• Check</li> <li>• Wire</li> </ul>
<b>Publicly Traded Stock</b>	<ul style="list-style-type: none"> <li>• Held in a Brokerage Account</li> <li>• Held by the Transfer Agent</li> <li>• Held in a Dividend Reinvestment Plan</li> <li>• Held in certificate form</li> </ul>
<b>Mutual Funds</b>	<ul style="list-style-type: none"> <li>• Held by the Fund family</li> <li>• Held in a brokerage account</li> </ul>
<b>Other Securities</b>	<ul style="list-style-type: none"> <li>• Treasury Notes</li> <li>• Publicly Traded Bonds</li> </ul>
<b>Charitable Assets</b>	<ul style="list-style-type: none"> <li>• Other Donor Advised Fund</li> <li>• Private Foundation</li> </ul>

The following may be gifted to The U.S. Charitable Gift Trust, subject to approval by the Trustee:	
<b>Subject to approval by the Trustee:</b>	<ul style="list-style-type: none"> <li>• Privately Held Stock</li> <li>• Restricted Stock</li> <li>• S-Corp Stock</li> <li>• Life Insurance Policies</li> <li>• Tradable Real Estate Investment Trusts</li> <li>• Unit Investment Trust(s)</li> <li>• Annuities</li> <li>• Real Estate</li> <li>• Certain Non-Marketable Valuables</li> </ul>

**For those interested in estate planning, you may designate The U.S. Charitable Gift Trust as the beneficiary of assets, either in a will or on existing accounts, such as an Individual Retirement Account (IRA). Please contact the Trustee for additional information.**



# Donor Advised Fund

## Donor Information Form



**Important information about procedures for opening a new account** – To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account with that financial institution. What this means for you: When you open an account, we, or your investment professional, will ask for your name, address, date of birth, and other information that will allow us to identify you. We, or your investment professional, may also ask to see your driver's license or other identifying documents.

### SECTION 1: DONOR INFORMATION

The Donor(s) and Donor Advisor(s) of an account have full and equal rights to recommend grants and to elect successors. We will mail correspondence to each Donor if their addresses are different.

#### DONOR 1 – PLEASE COMPLETE ALL FIELDS.

Donor Name Date of Birth Social Security Number

Account Mailing Address (All account correspondence will be sent to this address. P.O. Boxes are allowed.)

City State ZIP

Residential Street Address (if different from above. P.O. Boxes are not allowed.)

City State ZIP

Daytime Phone Evening Phone E-Mail Address (Optional)

If you are a Non-U.S. Citizen and cannot provide a Social Security Number, please provide information for a Government Issued ID:

Government Issued ID Number ID Type (e.g., Passport)

#### DONOR 2 (IF APPLICABLE) PLEASE COMPLETE ALL FIELDS.

Donor Name Date of Birth Social Security Number

Residential Street Address (if different from above. P.O. Boxes are not allowed.)

City State ZIP

Daytime Phone Evening Phone E-Mail Address (Optional)

If you are a Non-U.S. Citizen and cannot provide a Social Security Number, please provide information for a Government Issued ID:

Government Issued ID Number ID Type (e.g., Passport)

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**NAME DONOR ADVISOR(S) (OPTIONAL)**

Donors may elect individuals, for example, family, friends, or other acquaintances, to serve as Donor Advisors and make grant recommendations. These designations are revocable during the life of the Donor.

..... DONOR ADVISOR NAME 1 ..... Date of Birth ..... Social Security Number

..... Mailing Address .....

..... City, State & ZIP ..... Daytime Phone ..... E-mail Address (Optional) .....

..... DONOR ADVISOR NAME 2 ..... Date of Birth ..... Social Security Number

..... Mailing Address .....

..... City, State & ZIP ..... Daytime Phone ..... E-mail Address (Optional) .....

**SECTION 2: NAME YOUR ACCOUNT**

You may select any title you wish for the account, and you may include your name or any other name in the title (for example, "The Smith Family Charitable Fund" or "The John Q. Smith Family Foundation"). If you do not provide a name for your account, it will be titled "The (Donor Name) Charitable Fund."

..... Account Name .....

**SECTION 3: INITIAL CONTRIBUTION (\$10,000 MINIMUM INITIAL CONTRIBUTION PER ACCOUNT)**

..... (\$) Approximate Value: .....  Check  Wire  Security  Other: .....

**Note: Securities held for one year or less generally are deductible at the lesser of cost basis or fair market value. (See Gifting Booklet for details.)**

Please refer to the Gifting to The U.S. Charitable Gift Trust® included in the Donor Advised Forms Booklet for specific instructions on making contributions, or call 1-800-664-6901 for assistance.

**SECTION 4: DONOR'S FINANCIAL ADVISOR (This section should be completed by your advisor.)**

..... Advisor's Firm ..... Advisor Name

..... Mailing Address ..... Advisor Signature

..... City, State & ZIP ..... Telephone

..... E-Mail Address (optional) ..... Fax Number

..... Broker/Dealer Firm (if different from above) ..... Branch Number (if any) / Representative Number

**SECTION 5: INVESTMENT OF INITIAL CONTRIBUTION**

Please read the Gifting Booklet before making your investment selection(s). Allocate the combinations to total 100%. You may recommend future transfers of your account among the Funds, subject to the approval of the Board of Directors.

..... % Growth Fund ..... % Growth & Income Fund ..... % Cash Management Fund

..... % Income Fund ..... % Preservation Fund

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**SECTION 6: SUCCESSOR ELECTION**

Upon the deaths of the Donor Advisors listed in Section 1 of this form, the value of your Donor Advised Fund may be allocated using the options detailed below. Options A, B, or C may be changed by you at any time by submitting a written request; option D is irrevocable. Refer to the Gifting Booklet for details.

**OPTION A .....% SUCCESSOR DONOR ADVISOR** – Donors may elect an individual(s) to succeed them on the account with full rights as Donor(s). Refer to the Gifting Booklet for details. Please attach any additional elections if necessary.

SUCCESSOR DONOR ADVISOR NAME 1	Date of Birth	Social Security Number
Mailing Address		
City, State & ZIP	Daytime Phone	E-mail Address (Optional)

SUCCESSOR DONOR ADVISOR NAME 2	Date of Birth	Social Security Number
Mailing Address		
City, State & ZIP	Daytime Phone	E-mail Address (Optional)

**OPTION B .....% DISTRIBUTION TO CHARITABLE ORGANIZATION(S)** – Donors may choose to recommend to the Board of Directors one or more qualified tax-exempt organizations to receive the remaining assets in their account. Please attach any additional elections if necessary. You may recommend up to 10 charities; total allocation must equal 100%.

ORGANIZATION 1	Federal Tax ID Number (if known)
Mailing Address	Phone
City, State & ZIP	Percentage (%) of The U.S. Charitable Gift Trust® Account

ORGANIZATION 2	Federal Tax ID Number (if known)
Mailing Address	Phone
City, State & ZIP	Percentage (%) of The U.S. Charitable Gift Trust® Account

**OPTION C .....% CHARITABLE ORGANIZATION ENDOWMENT.**

Donors may choose to have their account remain in existence and recommend to the Board of Directors one or more qualified tax-exempt organizations to receive annual grants from their account. Please attach any additional elections if necessary. You may recommend up to 10 charities.

ORGANIZATION 1	Federal Tax ID Number (if known)
Mailing Address	Phone
City, State & ZIP	
Special Allocation or Purpose (if applicable)	

Distribute Annually .....% or \$ ..... of Available Account Balance

**NEXT PAGE ►**

.....  
**ORGANIZATION 2** Federal Tax ID Number (if known)  
 .....  
 Mailing Address Phone  
 .....  
 City, State & ZIP  
 .....  
 Special Purpose or Allocation (if applicable)  
 .....  
 Distribute Annually ..... % or \$ ..... of Available Account Balance

**OPTION D .....% IRREVOCABLE CHARITABLE ORGANIZATION ENDOWMENT.**

Donors may choose to have their account remain in existence and recommend to the Board of Directors that one or more qualified tax-exempt organizations receive annual grants from their account. This is an irrevocable designation. Please attach any additional elections if necessary. You may recommend up to 10 charities.

.....  
**ORGANIZATION 1** Federal Tax ID Number (if known)  
 .....  
 Mailing Address Phone  
 .....  
 City, State & ZIP  
 .....  
 Special Purpose or Allocation (if applicable)  
 .....  
 Distribute Annually ..... % or \$ ..... of Available Account Balance

.....  
**ORGANIZATION 2** Federal Tax ID Number (if known)  
 .....  
 Mailing Address Phone  
 .....  
 City, State & ZIP  
 .....  
 Special Purpose or Allocation (if applicable)  
 .....  
 Distribute Annually ..... % or \$ ..... of Available Account Balance

**SECTION 7: DONOR SIGNATURES**

I/we acknowledge that I/we have reviewed the current Gifting Booklet of The U.S. Charitable Gift Trust, including the Important Information About Procedures For Opening a New Account appearing on page one of the application and agree to its terms and conditions described therein. I/we are of legal age and understand that any donation, once accepted by the Directors, represents an irrevocable donation to The U.S. Charitable Gift Trust and is not refundable to me/us. I/we hereby certify to the best of my/our knowledge that all information presented in connection with this application is true, correct and complete, and I/we will notify the The U.S. Charitable Gift Trust promptly of any changes.

.....  
 Donor #1 Signature Date  
 .....  
 Name (Please print)

.....  
 Donor #2 Signature (if applicable) Date  
 .....  
 Name (Please print)

# Giftng to The U.S. Charitable Gift Trust®



Please review the instructions below prior to giftng to The U.S. Charitable Gift Trust.

Contact information for the Trustee, Wilmington Trust Retirement & Institutional Services, is:

The U.S. Charitable Gift Trust®  
 c/o Wilmington Trust Retirement & Institutional Services  
 2710 Centerville Road, Suite 101, Wilmington, DE 19808

Phone: 1-800-664-6901  
 Fax: 1-302-636-8585  
 www.uscharitablegifttrust.org

CONTRIBUTION TYPE	INSTRUCTIONS
<b>CASH</b>	
<b>Check</b>	Please make the check payable to Wilmington Trust Retirement & Institutional Services. Mail check along with the Donor Information Form* to the Trustee.
<b>Wire</b>	Please contact the Trustee at 800-664-6901 for Wire Instructions.
<b>SECURITIES</b>	
<b>Stock Certificate</b>	Endorse the certificate(s) by writing "Wilmington Trust Retirement & Institutional Services" between the words appoint and attorney in the space provided on the back of the certificate. Date and sign your certificate exactly as your name appears on the front. Have your signature medallion guaranteed. Mail the certificate along with the Donor Information Form* to the Trustee.
<b>Stock or Other Marketable Securities Held in Brokerage Account</b>	Complete the form Letter of Authorization to Transfer Securities. Send the original letter to the firm holding the stock and a copy of the letter to the Trustee, along with the Donor Information Form.* Please review <b>Guide to Gifting Securities</b> for additional information on completing the letter.
<b>Mutual Funds Held in Brokerage Account or by Fund family</b>	Complete the form Letter of Authorization to Transfer Securities. Send the original letter to the Trustee, along with the Donor Information Form.* Please review Guide to Gifting Securities for additional information on completing the letter.
<b>CHARITABLE ASSETS</b>	
<b>Donor Advised Fund or Private Foundation</b>	Recommend a grant from the existing Charitable Asset to The U.S. Charitable Gift Trust, TIN 31-1663020. Mail or fax the Donor Information Form to the Trustee, noting the funding that will arrive from another Charitable Asset.
<b>OTHER TYPES OF GIFTS</b>	
<b>Please contact the Trustee for additional information to gift the following:</b>	<ul style="list-style-type: none"> <li>• Stock held in Dividend Reinvestment Plan</li> <li>• Privately Held Stock</li> <li>• Restricted Stock</li> <li>• Stock held by Transfer Agent</li> <li>• S-Corp Stock</li> <li>• Life Insurance Policies</li> <li>• Tradeable Real Estate Investment Trusts</li> <li>• Unit Investment Trust(s)</li> <li>• Pooled Income Fund</li> <li>• Annuities</li> <li>• Real Estate</li> <li>• Certain Non-Marketable Valuables</li> </ul>

\*If this is an additional contribution, please send the Additional Contribution Form in lieu of the Donor Information Form.

# Guide to Gifting Securities



For gifts of stocks, mutual funds or other marketable securities held in a brokerage account or by the Fund family, please complete the **Letter of Authorization to Transfer Securities**. Please contact the Trustee, Wilmington Trust Retirement & Institutional Services, at 1-800-664-6901 for assistance to gift.

## GIFTS OF TRADABLE SECURITIES, E.G., STOCKS:

Tradable securities refers to the characteristic that the security may be transferred electronically to The U.S. Charitable Gift Trust®. Mutual funds are not considered tradeable securities.

### STEPS TO GIFT:

1. Complete the Letter of Authorization to Transfer Securities.
2. Send the original letter to the broker/dealer holding the security(ies).
3. Mail or fax a copy of the letter to Wilmington Trust Retirement & Institutional Services. As the security(ies) will arrive in a general account for The U.S. Charitable Gift Trust, providing a copy of the letter alerts Wilmington Trust Retirement & Institutional Services to watch for your gift.
4. Upon receipt of your gift, Wilmington Trust Retirement & Institutional Services will mail you an acknowledgement of your gift, including the value you may be eligible to use as a tax deduction.

## GIFTS OF MUTUAL FUND SHARES:

Mutual fund shares must be transferred from your account, held at either the broker/dealer or Fund Family, to an account registered to The U.S. Charitable Gift Trust.

### STEPS TO GIFT:

1. Complete the Letter of Authorization to Transfer Securities.
2. Send the original letter and a copy of a recent account statement to Wilmington Trust Retirement & Institutional Services. Please note that you should not send anything directly to the company holding your mutual fund shares.
3. Wilmington Trust Retirement & Institutional Services will work directly with the company holding your mutual fund shares to transfer and redeem the shares.
4. Upon receipt of your gift, Wilmington Trust Retirement & Institutional Services will mail you an acknowledgement of your gift, including the value you may be eligible to use as a tax deduction.

## ADDITIONAL INFORMATION

- The Letter of Authorization to Transfer Securities should be used for either tradable securities or mutual funds. If you are gifting both types of securities, please complete one form for each type of gift.
- Your signature must have a medallion guarantee. For your security, companies will require verification that you are authorizing the transaction.
- If you have any questions, please contact Wilmington Trust Retirement & Institutional Services at 1-800-664-6901.

# Letter of Authorization to Transfer Securities



## Donor Advised Fund

**Donor Instructions:** Please complete the information to gift publicly traded securities to The U.S. Charitable Gift Trust®. You may refer to the Guide to Gifting Securities for detailed instructions to complete the information below. A reminder that gifts of tradable securities, for example stock, should have the original letter sent to the broker/dealer and a copy to the Trustee, Wilmington Trust Retirement & Institutional Services. Gifts of mutual funds should have the original letter sent to Wilmington Trust Retirement & Institutional Services, and the Trustee will work directly with the broker/dealer to transfer the designated mutual fund shares.

**Broker/Dealer Instructions:** As instructed by the client, please deliver all eligible securities to The U.S. Charitable Gift Trust. All transfers are to be made in-kind. For transfers of tradable securities, please deliver to:

Wilmington Trust Retirement & Institutional Services, Trustee for The U.S. Charitable Gift Trust  
c/o Fifth Third Bank  
DTC Number 2116  
Account Number 010034177754

For transfers of mutual funds, please refer to the attached letter from Wilmington Trust Retirement & Institutional Services. If you have any questions, please contact Wilmington Trust Retirement & Institutional Services at 1-800-664-6901.

Name of Broker/Dealer Holding Assets Date Daytime Phone Number

Mailing Address

City, State & ZIP

Dear: Name of Broker/Dealer Holding Asset(s)

Please accept this letter as my authorization to irrevocably transfer the following position(s) from my account, provided below, to The U.S. Charitable Gift Trust.

From: My Account Number

- 1. shares of Name of Security (and symbol, and/or cusip if known)
- 2. shares of Name of Security (and symbol, and/or cusip if known)
- 3. shares of Name of Security (and symbol, and/or cusip if known)

Sincerely,

Signature #1

Name (Please Print)

Signature #2 (If Applicable)

Name #2 (Please Print)

**Required  
Place Medallion  
Guarantee Program  
Signature Stamp Here**



# Recommending Grants

Please refer to the [Grant Recommendation Guidelines](#) for assistance with completing the [Grant Recommendation Form](#).

# Grant Recommendation Guidelines

Please refer to the information below to assist you with completing the Grant Recommendation Form. The guide serves as a brief review of information described in more detail in the section entitled “Making Grants” in The U.S. Charitable Gift Trust® Gifting Booklet. If you have any questions, please contact the Trustee, Wilmington Trust Retirement & Institutional Services, at 1-800-664-6901. Please fax OR mail all grants; multiple submissions of grant recommendations may result in duplicate grants.

- Minimum grant amount is \$250.
- For accounts less than 12 months old, grants made from your account which together exceed more than 20% of contribution(s) to the account will be subject to a 1% administrative charge.
- For accounts in more than one Investment Fund, the grant amount will be taken in the percentages allocated in the asset allocation model – unless directed otherwise.
- Grants will be mailed by the Trustee directly to a confirmed address of the charitable organization.
- Verification and distribution of grants are generally completed within two business days.
- Grant Recommendations cannot be honored if the information provided indicates they:
  - Fulfill a pre-existing pledge;
  - Provide a private benefit to the Donor or another individual, for example: tuition, membership fees, dues, benefit tickets, goods bought at auction, etc.
  - Are recommended to certain supporting organizations.
- If you are interested in obtaining online access to make Grant Recommendations or would like additional Grant Recommendation Forms, please contact the Trustee, Wilmington Trust Retirement & Institutional Services, at 1-800-664-6901.

# Donor Advised Fund Grant Recommendation Form



Please review Grant Recommendation Guidelines for detailed instructions.

## SECTION 1: ACCOUNT INFORMATION

Account Name \_\_\_\_\_ Account Number \_\_\_\_\_

## SECTION 2: ACKNOWLEDGEMENT INFORMATION

Please select one of the following:  Full Anonymity  Partial Anonymity – Account Name Only  Full Disclosure\*  
\* If you selected 'Full Disclosure,' please provide the name of the individual(s) you would like to be acknowledged in the grant letter. If the individual(s) named is not a Donor Advisor, please provide a mailing address: \_\_\_\_\_

## SECTION 3: GRANT AMOUNT AND FREQUENCY

Amount of Grant (Minimum amount: \$250) \_\_\_\_\_  
Please issue this grant:  As soon as possible  On this future date: \_\_\_\_\_  
 Recurring Grant. Please select the frequency:  Monthly  Quarterly  Semiannually  Annually  
Start Date \_\_\_\_\_ End Date (If Applicable) \_\_\_\_\_

## SECTION 4: RECOMMENDED CHARITABLE ORGANIZATION

Name of Charitable Organization \_\_\_\_\_  
Address \_\_\_\_\_ City, State & ZIP \_\_\_\_\_  
Attention Party (If Applicable) \_\_\_\_\_ Website (if known) \_\_\_\_\_  
Phone (If Known) \_\_\_\_\_ Federal Tax ID Number (if known) \_\_\_\_\_

## SECTION 5: SPECIAL PURPOSE (IF APPLICABLE)

In honor of: \_\_\_\_\_  In memory of: \_\_\_\_\_  
 Other: \_\_\_\_\_

## SECTION 6: SIGNATURE(S)

I acknowledge that I have reviewed the current Gifting Booklet of The U.S. Charitable Gift Trust. I hereby certify that neither I nor anyone related to me: (i) will receive any benefit from the recommended charitable organization (for example, I am not using this to pay for tuition, membership fees, dues, benefit tickets, goods bought at auction, etc.) by way of this grant if distributed, (ii) control the grantee, or in the case of a supporting organization, the supported charity and (iii) the grant does not fulfill a pre-existing pledge to the recommended charitable organization. I understand that I will not be entitled to a tax deduction when the grant is made.

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_  
Name (Please print) \_\_\_\_\_



# Donor Advised Fund Additional Contribution Form



## SECTION 1: ACCOUNT INFORMATION

Account Name Account Number

Please complete all fields below if the additional contribution is from a third party.

### DONOR INFORMATION Please complete all fields

Donor Name Date of Birth Social Security Number

Mailing Address (Acknowledgement Letter will be sent to this address. P.O. Boxes are allowed.)

City, State, Zip

Residential Street Address (Required if different from above. P.O. Boxes are not allowed.)

City, State, Zip

Daytime Phone Evening Phone E-Mail Address (Optional)

If you are a Non-U.S. Citizen and cannot provide a Social Security Number, please provide information for a Government Issued ID:

Government Issued ID Number ID Type (e.g., Passport)

## SECTION 2: CONTRIBUTION (\$1,000 MINIMUM ADDITIONAL CONTRIBUTION)

(\$) Approximate Value:  Check  Wire  Security  Other: .....

Donors may make contributions to the Donor Advised Fund accounts at any time in amounts of \$1,000 or more. Please refer to Gifting to The U.S. Charitable Gift Trust® for instructions on contributing securities and mutual fund shares. Note: Securities held by you for one year or less are generally deductible at the lesser of cost basis or fair market value. See the Gifting Booklet for more information.

## SECTION 3: INVESTMENT FOR ADDITIONAL CONTRIBUTION

The additional contribution will be allocated identical to the current asset allocation model selected for the Donor Advised Fund account. If you would like details of the current asset allocation, please contact the Trustee, Wilmington Trust Retirement & Institutional Services at 1-800-664-6901.

## SECTION 4: SIGNATURE(S)

I acknowledge that I have read The U.S. Charitable Gift Trust Gifting Booklet and agree to the terms and conditions described therein. I understand that any contribution, once accepted by the Trustee, represents an irrevocable contribution to The U.S. Charitable Gift Trust and is not refundable to me. I certify that all information provided by me in my original Donor Information Form is still accurate and complete. (Please attach additional donor signatures, if necessary.)

Donor Signature Date

Name (Please Print)



## CONTACT INFORMATION

### Trustee

**The U.S. Charitable Gift Trust®**  
c/o Wilmington Trust Retirement  
& Institutional Services  
2710 Centerville Road, Suite 101  
Wilmington, DE 19808  
Voice: 1-800-664-6901  
Fax: 1-302-636-8585  
[www.uscharitablegifttrust.org](http://www.uscharitablegifttrust.org)

### Administrator and Investment Manager

**Eaton Vance Management**  
Two International Place  
Boston, MA 02110  
[www.eatonvance.com](http://www.eatonvance.com)

The **U.S.**  
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GIFT TRUST®

Two International Place, Boston, MA 02110 [www.eatonvance.com](http://www.eatonvance.com)

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