

Planned Gift Donor Account Application

RAYMOND JAMES Charitable

**RJ Charitable
Service Center**
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Form #

FA #

Branch #

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HOW TO NAME RAYMOND JAMES CHARITABLE AS BENEFICIARY- Individuals have the opportunity to name Raymond James Charitable as beneficiary of their will, trust, IRA, annuity contract or life insurance policy. By doing so, they can create a "planned gift" that will be distributed to Raymond James Charitable after their death.

WITH THIS TYPE OF AN AGREEMENT, ONCE THE ACCOUNT IS FUNDED THE CLIENT CAN:

- Designate donor advisors who will make grant and investment recommendations
- Request that periodic grants be made to a specific, eligible charity
- Request that periodic grants be made to eligible charities in one or more areas of charitable interest

TO SET UP THIS TYPE OF ARRANGEMENT:

- The client should complete and submit this application
- In a will or trust, the attorney needs to use the legal name "Raymond James Charitable Endowment Fund" as the name of the beneficiary.
- The attorney can also include "for the benefit of the..." and mention the intended account name (i.e., the Smith Family Foundation).
- In the case of an IRA, annuity contract or life insurance policy, most beneficiary designation forms require the tax ID number of the beneficiary. The tax ID of Raymond James Charitable is 59-3652538.
- Please provide a copy of the beneficiary designation form and/or the portion of the document referencing Raymond James Charitable to complete our records.

Please contact RJCHARITABLE@RAYMONDJAMES.COM or 866-687-3863 or ext 77221 with any questions.

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DONOR INFORMATION

Donor's name

Social security or tax ID number

Street address

Date of birth

City, state and zip

Daytime phone number**JOINT DONOR INFORMATION**

Donor's name

Social Security or tax ID number

Street address

Date of birth

City, state and zip

Daytime phone number

HOW DO YOU LIKE TO BE ADDRESSED IN CORRESPONDENCE? (For example, do you prefer "Mr. and Mrs. John Smith" or "John and Jane Smith"?)

DONOR'S ACCOUNT TITLE- You may select any reasonable title for the account you wish, and you may include your name or any other name in the title. (For example, "John Smith Memorial Fund.") Your account will be titled "The [Donor/Joint Donor] Family Foundation" unless you specify otherwise.

PLANNED CONTRIBUTION- (Minimum of \$10,000) Please provide the source and account number for your planned contributions. Planned contributions can come from (but are not limited to) a will, pursuant to your revocable living trust, remainder beneficiary of a charitable remainder trust, beneficiary of an IRA account, beneficiary of an annuity contract, or beneficiary of a life insurance policy.

TO BE COMPLETED BY FINANCIAL ADVISOR

Name of donor's financial advisor. Please include all advisor names if this is a split rep.,

Speed dial number

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Is the financial advisor the primary donor advisor, or related* to the primary donor advisor named on this account?

Yes No

Is the financial advisor the successor donor advisor, or related* to the successor donor advisor named on this account?

Yes No

*The definition of family for the purposes of this application is spouse, ancestor, child, grandchild, great grandchild; spouses of a child, grandchild, and great grandchild; brothers and sisters (of whole or half-blood) and brothers' and sisters' spouses.

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RECOMMENDED INVESTMENT OF INITIAL CONTRIBUTION - I/We request our contribution be invested as follows:

SELECT ONE

LIBERTY MUTUAL FUND OPTION FOR ACCOUNT BALANCES OF ANY SIZE

- ▶ **MONEY MARKET OBJECTIVE:** Seeks the preservation of capital and the production of income exclusively through investment in a money market fund investing in the highest quality, very short-term debt instruments.
- ▶ **INCOME OBJECTIVE:** Seeks income and capital preservation primarily through the use of a mutual fund portfolio consisting of exposure to U.S. government and global corporate bonds.
- ▶ **INCOME WITH GROWTH OBJECTIVE:** Seeks income and provides a growth component through the use of a mutual fund portfolio consisting of exposure to U.S. government and global corporate bonds and a modest exposure to diversified common stocks.
- ▶ **BALANCED OBJECTIVE:** Seeks to provide a balanced allocation through the use of a mutual fund portfolio providing both growth and income.
- ▶ **GROWTH WITH INCOME OBJECTIVE:** Seeks long-term growth of capital primarily by investing in a diversified mutual fund portfolio consisting of equity exposure and income through the use of U.S. government and global corporate bonds.
- ▶ **GROWTH OBJECTIVE:** Seeks long-term growth of capital primarily by investing in a diversified mutual fund portfolio consisting of equity exposure across market capitalization and growth spectrums, including prudent exposure to international markets.
- ▶ **ENVIRONMENTAL, SOCIAL & GOVERNANCE (ESG) BALANCED OBJECTIVE:** Seeks long-term capital appreciation with strong growth potential through investments with best-in-class environmental, social and governance practices.

INVESTMENT ADVISOR PROGRAM (IAP) OPTION FOR ACCOUNT BALANCES OF \$500,000 OR MORE

- ▶ **I/WE WANT TO USE THE INVESTMENT ADVISOR PROGRAM (IAP) OPTION.**
Complete and attach the IAP Agreement. Your financial advisor can provide you with this form.

Note: Successor advisors may recommend changes to the investment option in the future.

ACCOUNT SUCCESSION (This section is optional and may be modified at your request at a later date.)

Accounts may be administered in various ways after the death, resignation or incapacity of the initial donor advisor(s):

- You may name one or more Successor Donor Advisors to your account. The Successor Donor Advisors may be a spouse, relative(s) or other individual(s) who is at least 18 years of age, and may serve jointly or in succession to each other. Note: Joint Successor Donor Advisors may submit grant recommendations independent of each other.
- You may elect to divide the account into separate funds (provided each is funded with a minimum of \$10,000) naming separate advisors to each account.
- You may wish to leave a legacy by naming one or more organizations or areas of interest to support beyond your lifetime.

Please select your preference:

- ▶ A. I/We elect to name one or more organizations or areas of interest to support. **Attach Legacy Giving Recommendation form(s).**

OR

- ▶ B. I/We elect to designate one or more Successor Donor Advisors to make recommendations of grants to charities after the account is funded.

If naming more than one advisor, please indicate by checking appropriate box below:

- ▶ The Successor Donor Advisors named below will serve one after the other.
- ▶ The Successor Donor Advisors named below will serve at the same time.
 - ▶ Maintaining a single account (each may make recommendations independent of other Successor Donor Advisor(s)).
 - ▶ Splitting the account into separate portions. (Please indicate in Successor Donor Advisor information below the percentage of each share. Must total 100%.)

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Please provide Successor Donor Advisor information below.

(If necessary, attach additional Successor Donor Advisor information on a separate sheet of paper.)

Successor Donor Advisor 1

Name	Relationship to Donor, if individual		
Social Security or tax ID Number	Date of birth	Daytime phone number	
Street address	City	State	ZIP

If opting to split the account into separate portions, indicate percentage of share for Successor Donor Advisor 1: _____ %

Successor Donor Advisor 2

Name	Relationship to Donor, if individual		
Social Security or tax ID Number	Date of birth	Daytime phone number	
Street address	City	State	ZIP

Indicate percentage of share for Successor Donor Advisor 2: _____ %

Successor Donor Advisor 3

Name	Relationship to Donor, if individual		
Social Security or tax ID Number	Date of birth	Daytime phone number	
Street address	City	State	ZIP

Indicate percentage of share for Successor Donor Advisor 3: _____ %

If naming more than three successors, attach additional pages. If so, percentage for successor(s) attached: _____ %
Total = 100 %

SIGNATURES

I acknowledge that I have received and read the Raymond James Charitable Donor Advised Fund Disclosure Brochure and agree to its terms and/or conditions described therein. I hereby certify that to the best of my knowledge all information presented in connection with this application is accurate and I will notify Raymond James Charitable promptly of any changes. IMPORTANT: I understand that any contribution, once accepted, represents an irrevocable contribution to Raymond James Charitable and is not refundable to me.

Donor Signature	Date	Joint Donor Signature	Date
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