

Donor Account Application- IAD



RJ Charitable
Service Center
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0 2 7 8 1

Form #

Advisor Rep #

Advisor Firm #

Speed Dial #

Accounts carried by Raymond James & Associates, Inc., Member New York Stock Exchange/SIPC

DONOR ADVISOR INFORMATION

Primary Donor Advisor

Prefix First Middle Last Name Suffix

SSN Date of Birth

Email Address - Required for online account access Telephone

Physical Address **Note:** Your legal address cannot be a P.O. Box or International Address

Mailing Address - If different than above

Joint Donor Advisor

Prefix First Middle Last Name Suffix Relationship to Primary Donor Advisor

SSN Date of Birth

Email Address - Required for online account access Telephone

Physical Address **Note:** Your legal address cannot be a P.O. Box or International Address

Mailing Address - If different than above

ACCOUNT TITLE

Please select an account title. Your title must contain one of the following: Account, Foundation, Fund. For Example: "John Smith Memorial Fund." Your account will be titled "The [Primary Donor/Joint Donor] Family Fund" unless you specify otherwise.

DONORVIEW

Our DonorView website provides online access for viewing account information, making contributions, and submitting grants to charities. We will create a username and temporary password for you to access your account.

For increased security, we offer multi-factor authentication on this site, which requires us to text or call you with a code before logging in with a new device. Please provide the best number to reach you via text or a direct line to receive the automated code over the phone.

Primary Donor Phone _____

Joint Donor Phone _____

If your circumstances prevent you from using the internet please check here:

PAPERLESS FEATURES

You will receive all communications, including statements, electronically at the email address you provided. If you would like to receive printed copies by mail, please check the box below.

I prefer printed document delivery.

Under policies of Raymond James Charitable, and in accordance with the anti-money laundering regulations applicable to the financial institutions that provide financial services to Raymond James Charitable, we obtain, record, and may verify information that identifies each person and entity who establishes a fund within Raymond James Charitable, and other people and entities who contribute or have access to the fund established. Raymond James Charitable and Raymond James Trust, N.A., as its service provider, will ask for the name, address, Social Security number, date of birth, and other information that will allow us to identify people associated with the fund. We may also ask to see driver's licenses or other identifying documents, and we may verify the information obtained.

Advisor Rep#

TO BE COMPLETED BY ADVISOR

Please include all advisor representative names if this is a split rep. FA # to be associated with this account: _____

Name of donor's advisor representative	Phone # for multi factor authentication	Advisor Firm number
Name of donor's advisor representative	Phone # for multi factor authentication	Advisor Firm number
Name of donor's advisor representative	Phone # for multi factor authentication	Advisor Firm number
Name of donor's advisor representative	Phone # for multi factor authentication	Advisor Firm number

Are any of the above representatives or any of advisor's other associates the donor or related* to the donor/joint donor named on this account?

- Yes No

Are any of the above representatives or any of advisor's other associates the successor or related* to the successor(s) named on this account?

- Yes No

*The definition of related 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.

INVESTMENT OPTIONS

Please select one of the following investment options. If no selection is made, the account will be invested in the Money Market option. You may request a change to the investment allocation as often as quarterly by submitting a Request for Change of Investment for the Raymond James Charitable board's consideration.

I/We request our contribution be invested in one of the following options.

SELECT ONE

LIBERTY OBJECTIVE 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) APPROACH.** Complete and attach the [Investment Advisor Program \(IAP\) Agreement - 2784](#). Your Advisor can provide you with this form.

ACCOUNT SUCCESSION

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.
- As an alternative to naming successor advisors, you may leave a legacy by naming one or more organizations or areas of interest to support beyond your lifetime.

Please select your preference:

- I/We elect to name one or more organizations or areas of interest to support. *Attach Legacy Giving Recommendation form(s) #02785.*

OR

- I/We elect to designate one or more Successor Donor Advisors to make recommendations for grants to qualified charities after the death, resignation or incapacity of the surviving Donor Advisor.

If naming more than one Successor Donor Advisor, please indicate by checking appropriate box below:

If no selection is made, the successor donor advisors will serve one after the other.

- The Successor Donor Advisors named below will serve one after the other.
- The Successor Donor Advisors named below will serve at the same time.

If no selection is made, the successor donor advisors will maintain a single account.

- 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%.)

Please provide Successor Donor Advisor information below.

Additional Successor Donor Advisor information fields on following page.

Successor Donor Advisor 1

_____ Name		_____ Relationship to Donor		
_____ Social Security	_____ 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		
_____ Social Security	_____ 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 2: _____ %

Advisor Rep#

Successor Donor Advisor Information, Continued

(If necessary, attach additional Successor Donor Advisor(s) information on a separate sheet of paper signed by the primary and joint donor advisor.)

Successor Donor Advisor 3

Name Relationship to Donor
Social Security 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 3: %

Successor Donor Advisor 4

Name Relationship to Donor
Social Security 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 4: %
If naming more than four successors, attach additional pages. If so, percentage for successor(s) attached: %
Total = 100 %

INITIAL CONTRIBUTION - (MINIMUM \$10,000)

Please indicate estimated initial contribution: _____

Source of Funds

Due to regulations in the securities industry, we are required to know more about our clients and as a result need to collect additional information regarding your employment and source of funds you are donating to RJ Charitable. Please check the box(es) that apply to your source of funds below.

- Salary/Wages/Savings
Social Security Benefits
Sale of Property or Business
Family/Relatives/Inheritance
Investment Capital Gains
Gifts
Gambling/Lottery
Other

Employment Status
Employed
Not Employed

Occupation Employer Name
Employer Address City State Zip Code

Contribution Type

- Check will be mailed - Make Checks payable to Raymond James Charitable and reference Donor Advised Fund Account Name you chose above in memo field. Send to RJ Charitable // P.O. Box 23559 // St. Petersburg, FL 33742
Securities and/or Cash held outside Raymond James - Upload Gift of Outside Assets # 02788 to Service Center
Cash or Securities held in a Raymond James Account - Fill out information below

Advisor Rep#

Your Name on Your Raymond James Account Name

Raymond James Account Number

Publicly-traded securities held for one year or less are generally deductible at the lesser of cost basis or fair market value. Pledged accounts must have a release of assets noted in Scratchpad. If the account is managed, notify the manager of the specific shares to be contributed to pause trading prior to submitting this form. This form cannot be used for transfers from IRAs.

AS MY/OUR IRREVOCABLE GIFT TO THE RAYMOND JAMES CHARITABLE ENDOWMENT FUND, PLEASE TRANSFER FROM THE ABOVE ACCOUNT THE CASH OR SECURITIES LISTED BELOW TO THE RAYMOND JAMES CHARITABLE ACCOUNT #60137199.

- Asset Type:** Entire Account
- Cash (select one): Full Balance or Specific Amount: \$ _____
- Utilize Margin? Yes No
- Securities - If transferring a portion of a multi-tax lot position, a FIFO method will be used unless otherwise specified. If fractional shares of stock are contributed, we will round down to the whole number unless it is the entire position held in the account. **NOTE:** Securities held for one year or less are generally deductible at the lesser of cost basis or fair market value.

Number of Shares	Symbol	Security Name	Specific Tax Lot Date	Number of Shares	Symbol	Security Name	Specific Tax Lot Date

Additional shares may be contributed using Additional Contribution Form: Addendum - 2783AD.

Are you submitting an addendum? Yes No

Move pending dividends/interest? Yes No

Is the representative listed above or any of the advisor's other associates related* to anyone contributing to this account? Yes No

*The definition of related 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.

SIGNATURES

I acknowledge that I have received and read the Raymond James Charitable Donor Advised Fund Disclosure Brochure dated 4/2019 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

Please contact RJCHARITABLE@RAYMONDJAMES.COM or call 866.687.3863 with any questions.

Registration # CH11828

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE.

HOW TO MAKE A CONTRIBUTION - These instructions cover contributions of cash and public securities to Raymond James Charitable. If you do not find instructions for your contribution type or if you need assistance, please call your Advisor or Advisor Representative or IAR.

Contribution Type	Send to Raymond James Charitable	Instructions
Cash		
Check	Donor Account Application (form #02781) and check	Make Checks payable to: Raymond James Charitable and reference Donor Advised Fund Account Name you chose above in memo field Send to: RJ Charitable // P.O. Box 23559 // St. Petersburg, FL 33742 or for overnight packages, mail to RJ Charitable // 880 Carillon Parkway // St. Petersburg, FL 33716
Wire Cash	Donor Account Application (form #02781) and the Gift of Outside Assets (form #02788) on RJnet.	Submit completed forms #02781 and #02788 to Raymond James Charitable through Service Center
Securities		
Raymond James Accounts	Donor Account Application (form #02781) and, if needed, Additional Contribution Form Addendum (form #02783)	Submit completed form #02781 and #02783 to Raymond James Charitable through Service Center.
Other Institutions	Donor Account Application (form #02781) and the Gift of Outside Assets (form #02788) on RJnet.	Submit completed forms #02781 and #02788 to Raymond James Charitable through Service Center and contact outside institution to initiate the transfer.

Financial advisors should submit forms via the Service Center portal. If you do not have a financial advisor, you may fax forms to 866.203.1077.

For instructions regarding other types of contributions please contact Raymond James Charitable, below.

Please contact RJCHARITABLE@RAYMONDJAMES.COM or 866.687.3863 with any questions.