

Donor Advised Fund Profile

Instructions: Please fill in all required items marked with *. When completed, print and mail it to us along with your initial gift to the address listed above. Questions, please call 1-800-746-8250.

A. DONOR INFORMATION

First Name* Middle Initial Last Name*
Birth Date* E-mail*
Home Address*
City* State* Zip Code*
Home Telephone* Cell Telephone

B. SPOUSE INFORMATION

First Name Middle Initial Last Name
Birth Date E-mail

C. DONOR ADVISED FUND NAME: (Do Not Use 'Foundation' or 'Trust in your fund name)*

D. CONTRIBUTION INFORMATION

Estimated Gift Value* Cash Stock
 Bond Mutual Fund
CUSIP/Ticker or Fund Name Shares

E. RECOMMEND INVESTMENT ALLOCATION

Options (Choose one): Income 20% Equity / 80% Fixed
 Money Market Balanced 40% Equity / 60% Fixed
 High Income 100% Fixed Growth 70% Equity / 30% Fixed

F. ADD ADDITIONAL ADVISORS (Optional)

Name	E-mail	Relationship	Full Rights or View Only
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G. ACCOUNT COMMENT

Tell us how you learned about the Deseret Trust Donor Advised Fund

Check all that apply

- Philanthropies
- Friend or family member
- Professional Advisor
- Publication
- Website or internet search
- Event
- Other

Names of referrals

I would be interested in being contacted by a philanthropic advisor from Philanthropies, a department of the Church of Jesus Christ of Latter-day Saints.

The Deseret Trust Donor Advised Fund Agreement

I/we desire to establish a Donor Advised Fund with Deseret Trust Company. I/we acknowledge that I/we have read the [Deseret Trust Company Rules and Policies](#) Regarding Donor Advised Funds and agree to the terms and or conditions described therein. I/we understand that any contribution, once accepted by Deseret Trust Company, represents an irrevocable gift and is not refundable to me/us.

I/we hereby certify that, to the best of my/our knowledge, all information presented in connection with this agreement and establishment of a Donor Advised Fund at Deseret Trust Company is accurate and that I/we will promptly notify Deseret Trust Company in writing of any changes. I/we acknowledge that I/we did not and will not receive anything in exchange for, or in consideration, of my/our contribution(s) to Deseret Trust Company and that Deseret Trust Company has obtained or will obtain exclusive legal control over the assets contributed, although I/ we, and advisors I/we may appoint, may retain and exercise non-binding advisory privileges in regard to grants from such Donor Advised Fund.

I/we acknowledge and agree that I/we will obtain and rely on independent tax advice regarding the establishment, maintenance and operation of the Donor Advised Fund and that I/we will not rely on legal or tax advice from Deseret Trust Company. I/ we agree to provide any identifying information reasonably requested by Deseret Trust Company.

Each of the undersigned acknowledges that he/she has read and understands this Agreement including DTC's Rules and Policies Regarding Donor-Advised Gifts and Program Guidelines attached as [Schedule A](#) to this Agreement, and that he/she agrees to be bound by its terms.

Acceptance* I have read and agree that I accept the terms and agreements of Deseret Trust DonorAdvised Funds' Rules and Policies regarding Donor Advised Gifts.

Signature*		Date*	
	Full Legal Name		

Signature		Date	
	Full Legal Name		