



A Foundation of  
Philanthropic Funds

Account Number: \_\_\_\_\_

## FJC COLLECTIVE GIVING LETTER AGREEMENT

Dear FJC:

This is a letter agreement between the undersigned individual(s) and FJC to establish a Collective Giving Account under and subject to the FJC Summary of Rules and Procedures for Collective Giving Accounts, as these procedures may be amended from time to time. The name of the fund will be the \_\_\_\_\_ Fund ("the fund").

I (we) acknowledge that FJC shall have all of the powers needed to carry out its purposes including, without limitation, the following:

- (1) to keep, sell, invest and reinvest the assets contributed;
- (2) to commingle for investment purposes the assets contributed, and
- (3) to distribute the contributed assets to organizations within the scope of its guidelines.

I (we) shall have the privilege of making written recommendations with respect to investments of, and distributions from, the Fund. However, I (we) acknowledge that, in accordance with Internal Revenue Service's Rules and Regulations, FJC shall be the absolute owner of the assets of the fund, and shall have ultimate authority over investments of the Fund, the selection of charities to receive distributions from the fund, and the timing and amounts of the distributions. I (we) also acknowledge that FJC will distribute funds contributed, and income earned by the funds, generally to charitable organizations described in sections 501(c)(3) and 509(a)(1), (2), or (3) of the Internal Code as it now exists or as it may be amended.

Additional Authorized Signatories (up to a total of three Authorized Signatories) may be designated using the FJC Program Options form. The completed form must be signed by an existing Authorized Signatory for the updates to take effect

FJC will accept contributions designated for the Fund, provided that checks for such contributions are made payable to "FJC," with the Fund's name in the memo line. Any other checks may be returned to the contributors. Prior to distribution, contributions received and designated for the Fund will be held and invested. All income earned will be treated in the same manner as contributions designated for the Fund. In accordance with IRS regulations, FJC will not be required to issue receipt letters to donors for gifts below \$250; however, FJC will provide a full list of account contributors, including supplied mailing addresses, to the Advisor on the account. Any bank fees and associated costs incurred or charged by FJC as a result of insufficient funds for a contribution or other reason shall be assessed against this account.

All funds received by FJC will be subject to fees, which for the initial term of this Agreement shall be (1) an initial fee of two per cent (2 %) of all funds received by FJC designated for the Fund, and (2) an annual fee of 1% of the average daily balance of funds in the account. The initial fee shall be charged to, and withdrawn from, the account at the time funds are received. The annual fee shall be charged to the account quarterly at the rate of 1/4 of 1% of the average daily balance of the funds designated. For the Fund and shall be withdrawn quarterly by FJC from the account. Upon termination of the Agreement for any reason and until all funds held pursuant to this Agreement shall have been distributed, subsequent fees shall be charged to the account at the annual rate of 1% of the average daily balance of such funds and withdrawn monthly.





A Foundation of  
Philanthropic Funds

Account Number: \_\_\_\_\_

The Advisor shall provide FJC with all proposed publicity or solicitation materials or public notices mentioning FJC prior to use, and shall not release or disseminate any such materials or notices without FJC's consent. The Advisor shall provide to FJC copies of all other publicity materials and public notices relating to the Fund's activities.

The Advisor agrees that FJC may use the Fund's name and/or a brief description of the Fund in FJC's publicly-available descriptive and marketing materials including, without limitation, FJC's website, its brochure, advertisements and any other materials describing the Collective Giving Program and/or FJC in general.

The Advisor agrees to include FJC in all media materials that list supporting organizations and financial supporter(s) of the Fund. FJC is to be provided the same size of type and placement as afforded the Fund's largest supporter(s) in all printed and web-based materials and named with the equal relevance and time in all audio media listings.

The Advisor may not assign all or any portion of its rights under this Agreement without the prior written consent of FJC. FJC may assign its rights under this Agreement without the prior written consent of the Advisor, provided that FJC shall promptly provide the Advisor with written notice of any such assignment.

The term of this Agreement shall be for one (1) year, commencing \_\_\_\_\_, but may be renewed at the discretion of FJC. My (our) agreement with FJC to establish and maintain the Fund will consist of this Letter Agreement and the Collective Giving Application that is attached to this letter. This Agreement shall be effective upon the execution of this Agreement by FJC. Upon termination of the Agreement, no further contributions designated for the Fund will be accepted by FJC; however, any funds previously designated for the Fund shall be held for distribution, subject to the terms of this Agreement, and all other applicable provisions of this Agreement shall survive until such time as the remaining account balance in the fund has been distributed in accordance with the Agreement and all obligations of the Fund have been fulfilled.

Very Truly Yours,

\_\_\_\_\_  
Donor Signature

\_\_\_\_\_  
Donor Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\*To accept grant investment recommendations from a Donor, FJC must have that Donor's signature and contact information on file.

Accepted by:

FJC - A Foundation of Philanthropic Funds

\_\_\_\_\_  
Signature Title Date



Account Number: \_\_\_\_\_

## COLLECTIVE GIVING APPLICATION

GROUP ADVISOR INFORMATION (Please be sure to include all the information for any Advisor who will be making recommendations for the Fund.)

Advisor

Advisor

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Email

\_\_\_\_\_  
Email

Relationship of Signatories to each other: \_\_\_\_\_

Each Advisor shall have the full, equal, and independent privilege to recommend investment preferences and grant distributions and to designate additional and successor Signatories.

IMPORTANT: For information about the privileges of Advisors, including their ability to limit or expand the privileges of other Advisors, and about the final disposition of your Fund, please consult the Summary of Procedures and Rules for Collective Giving Funds.

To designate additional and/or successor Advisors and to recommend the final disposition of your fund, please complete the Collective Giving Program Options form.

### HOW DID YOU LEARN ABOUT FJC?

Referred by: \_\_\_\_\_

Radio/Print Advertisement: \_\_\_\_\_

Other: \_\_\_\_\_





### INDIVIDUAL/FAMILY FJC FUND PROGRAM OPTIONS

Fund Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

IMPORTANT: For information about the privileges of Donors and Recommenders, including the ability of Donors to limit or expand the privileges of Recommenders, and about the final disposition of your Fund, please consult the Summary of Procedures and Rules for Donor Advised Funds.

### DESIGNATION OF ADDITIONAL RECOMMENDERS

Up to four persons (including the Donors) may serve as recommenders for the Fund at any one time, except that the Donor’s spouse and children may all serve, regardless of their number. IMPORTANT: In order for FJC to accept grant and investment recommendations from a Recommender, we must have that Recommender’s contact information and signature on file.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Fax

\_\_\_\_\_  
City/State                      Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Relationship to Donor

\_\_\_\_\_  
Additional Recommender’s Signature

Receive Fund Statements: \_\_\_Yes\_\_\_No

Account Portal Access: \_\_\_Full Access\_\_\_ReadOnly\_\_\_ No Access

\_\_\_\_\_  
Name

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Fax

\_\_\_\_\_  
City/State                      Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Relationship to Donor

\_\_\_\_\_  
Additional Recommender’s Signature

Receive Fund Statements: \_\_\_Yes\_\_\_No

Account Portal Access: \_\_\_Full Access\_\_\_ReadOnly\_\_\_ No Access



Account Number: \_\_\_\_\_

### DESIGNATION OF SUCCESSOR RECOMMENDERS

These individuals are authorized to make recommendations of investments of, and distributions from, the Fund after the death or disability of the Donors and the death, disability, termination, or resignation of all the Additional Recommenders.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Fax

\_\_\_\_\_  
City/State                      Zip

\_\_\_\_\_  
Email

This Recommender may replace any Donor or Recommender: Please Initial: \_\_\_\_\_

OR

This Recommender may replace the following Donor or Recommender: Print Name: \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Fax

\_\_\_\_\_  
City/State                      Zip

\_\_\_\_\_  
Email

This Recommender may replace any Donor or Recommender: Please Initial: \_\_\_\_\_

OR

This Recommender may replace the following Donor or Recommender: Print Name: \_\_\_\_\_



Account Number: \_\_\_\_\_

### FINAL DISTRIBUTION OF FUNDS

At such time as there are no surviving Donors or Recommenders, I/we recommend that any amounts remaining in my/our Fund should be treated as follows:

\_\_\_\_\_ % of the remaining balance be placed in the General Fund of FJC to create a Memorial Fund in the name of:

\_\_\_\_\_

\_\_\_\_\_ % of the remaining balance be maintained at FJC and the income from the Fund be contributed annually, in the percentages shown, to the following charities:

%	Charity Name and Address

\_\_\_\_\_ % of the remaining balance to be contributed, in the percentages shown, to the following charities:

%	Charity Name and Address

\_\_\_\_\_ I/we choose not to select a final designation at this time.

Please Initial: \_\_\_\_\_

Please Initial: \_\_\_\_\_

### SIGNATURES

Donor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Donor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

