

DONOR-ADVISED FUND

APPLICATION

DONOR 1			
Name			
Phone Number	E-mail Address		
Street Address			
City	State	Zip	
Date of birth	Social security number		
DONOR 2			
Name			
Phone Number	E-mail Address		
Street Address			
City	State	Zip	
Date of birth	Social security number		

SALUTATION Please indicate how you would like to be addressed on future correspondence, for example, Mr. Frank Brown; Dr. and Mrs. Frank Brown; Frank and Judy Brown. Salutation IRREVOCABLE CONTRIBUTION

Please list what asset(s) you wish to donate

to create your Donor-Advised Fund.

FUND NAME

Fund Name

You can select a name for your fund, like the "Brown Family Fund" or "Fund for Research Innovation."

SUCC	ESSOF	INFO	RMAT	ION

You may name an individual to succeed you as advisor on the fund for up to 10 years after your life-time(s), with full rights to recommend distributions to charity. This may be done now or at any time before your death. Please see the program brochure for details.

SUCCESSOR (OPTIONAL)

Name		
Mailing Address		
City	State	Zip
Day Phone	Evening Phone	
DONOR SIGNATU	JRE	
Donor 1 Signature	Date	
Donor 2 Signature	Date	

FUND INVESTMENT ALLOCATION

Asset allocation details will be provided. After reviewing your options, please provide your asset allocation choice:

Aggressive
Aggressive Growth
Aggressive Growth ESG
Growth
Growth ESG
Growth Income
Growth Income ESG
☐ Income Growth
Income
☐ High Income

Please mail this form to:

Anne Doyle Senior Director of Gift Planning 410-516-7954 adoyle@jhu.edu Office of Gift Planning San Martin Center, 2nd Floor 3500 San Martin Drive Baltimore, MD 21218