RAYMOND JAMES®
CHARITABLE ENDOWMENT FUND

DONOR ACCOUNT APPLICATION

DONOR INFORMATION

Primary Donor

Donor's name ____________________ Date of birth ____________________

Address ____________________ Social security or federal tax ID number ____________________

City, state and zip ____________________ Daytime phone number ____________________

Email ____________________

Joint Donor

Joint donor's name ____________________ Date of birth ____________________

Address (if different) ____________________ Social security or federal tax ID number ____________________

City, state and zip ____________________ Daytime phone number ____________________

Email ____________________

HOW DO YOU LIKE TO BE ADDRESSED IN CORRESPONDENCE TO YOU?

For example, do you prefer "Mr. and Mrs. John Smith" or "John and Jane Smith"?

____

ACCOUNT TITLE

You may select any account title 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 [Primary Donor/Joint Donor] Family Foundation" unless you specify otherwise.

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FINANCIAL ADVISOR AUTHORIZATION

Many donors desire the convenience of asking their financial advisor to submit grant recommendations on their behalf. *If you do not authorize* your financial advisor to enter grants on your behalf, please check here: ☐

INTERNET ACCESS

Our DonorWeb provides our online access for viewing your account and submitting Grant Recommendations online. Each current donor advisor is assigned a user ID and password when the account is established. *If you will not be accessing the account online* and do not want to receive a user ID and password, please check here: ☐

STATEMENTS

Donor advised account statements are issued on a quarterly basis and may be viewed online. When the new statement is available for viewing online, we will send a reminder to the email address provided above. *If you prefer to have a statement mailed to you,* please check here: ☐

INITIAL CONTRIBUTION – (Minimum: $10,000)

Please check one: ☐ Cash $____________________

☐ Securities (Please refer to page 4 for instructions on making a contribution and attach appropriate additional information as instructed.)

TO BE COMPLETED BY FINANCIAL ADVISOR

Name of donor's Financial Advisor	Speed dial #	Branch Number	Representative Number

DONOR ADVISED FUND

Raymond James Charitable Endowment Fund • P.O. Box 14407, St. Petersburg, FL 33733-4407
Phone: 866-OUR-FUND (687-3863) Fax: 727-567-8040 • www.MyFamilyFoundation.org
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DONOR ACCOUNT APPLICATION

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

FOR CONTRIBUTIONS UNDER $500,000:

Please check one.

☐ 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 the market capitalization and growth spectrums, including prudent exposure to international markets.

FOR CONTRIBUTIONS OF $500,000 OR MORE :

For contributions of $500,000 or more, you may select one (1) investment objective from the list above or choose from the following two investment approaches.

Please check one:

☐ **I/We want to use the Raymond James Consulting Services approach.**
Complete and attach a Raymond James Consulting Services (RJCS) Investment Policy Questionnaire. Your financial advisor can provide you with this form as well as additional information about RJCS.

☐ **I/We want to select from the separately-managed accounts listed below.**
From the list below, insert percentages in multiples of 5% for each of the assets you wish to have your contribution invested in. The total should equal 100%. (Total recommendation in any single managed fund must equal or exceed $100,000, with the exception of Eagle Asset Management Special Fixed Income, which requires a minimum investment of $350,000.)

ASSET CHOICES	ALLOCATION %
Eagle Asset Management, Inc. U.S. Government Securities	_________ %
Western Asset Management, Inc. Taxable Fixed Income	_________ %
Eagle Asset Management, Inc. Intermediate Conservative Taxable	_________ %
Eagle Asset Management, Inc. Special Fixed Income (Max. 20%)	_________ %
NOTE: The EAM Special Fixed Income choice requires a minimum investment of $350,000	
Eagle Asset Management, Inc. Equity Income (Max. 20%)	_________ %
Atlanta Capital Management Co., LLC Large-cap Growth Equity	_________ %
Eagle Asset Management, Inc. Large-cap Core	_________ %
Davis Advisers Large-cap Value Blend	_________ %
Eagle Asset Management, Inc. Large-cap Value Equity	_________ %
Lazard Asset Management International Large-cap Value Blend	_________ %
Eagle Boston Investment Management Small-cap Value Blend	_________ %
Eagle Asset Management, Inc. Small/Mid-cap Core Equity (Max. 20%)	_________ %
	Total = 100%

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 passing of the initial donor advisor(s):

- You may name one or more Successor Advisors to your account. The successors may be a spouse, relative(s), or other individual(s) who is at least 18 years of age, a corporation, or a qualified charity and may serve jointly or in succession to each other. Note: Joint advisors may submit grant recommendations independent of each other.
- You may 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:

☐ **I/We elect to name one or more organizations or areas of interest to support. Attach Legacy Giving Recommendation form.**

☐ **I/We elect to designate one or more Successor Donor Advisors to make recommendations of grants to charities after the death or resignation of the surviving Donor Advisor.**

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

☐ The Donor Advisors named below will serve *one after the other*.

☐ The Donor Advisors named below will serve *at the same time*:

☐ maintaining a single account (each may make recommendations independent of other Donor Advisor(s)).

☐ splitting the account into separate portions (please indicate in "Donor Advisor information" below the percentage of each share. Must total 100%).

Please provide Successor Advisor information below. *(If necessary, attach additional Successor Advisor information on a separate sheet of paper.)*

1. ____________________ ____________________

Name | Relationship to Donor, if individual

Social Security or Tax ID number | Date of birth | Daytime phone number

Street address | City, state and zip

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

2. ____________________ ____________________

Name | Relationship to Donor, if individual

Social Security or Tax ID number | Date of birth | Daytime phone number

Street address | City, state and zip

If opting to split the account into separate portions, indicate percentage of share for Donor Advisor 2: ________%

If naming more than 2 Successors, attach additional pages. If so, percentage for Successor(s) attached: ________%

Total = 100%

SIGNATURES

I acknowledge that I have received and read Raymond James Charitable Endowment 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 Endowment Fund promptly of any changes.
IMPORTANT: I understand that any contribution, once accepted by the Trustee, represents an irrevocable contribution to Raymond James Charitable Endowment Fund and is not refundable to me.

____________________ ____________

Donor signature | Date

____________________ ____________

Joint Donor signature | Date

HOW TO MAKE A GIFT FUND CONTRIBUTION – These instructions cover contributions of cash and public securities to the Raymond James Charitable Endowment Fund (RJCEF). If you do not find instructions for your contribution type or if you need assistance, please call your Financial Advisor. If you currently have an account with the RJCEF and wish to make an additional contribution, please complete and submit an Additional Contribution Form.

Contribution Type	Mail to the Gift Fund	Instructions
CASH		
Check	Donor Account Application and check	Make checks payable to: Raymond James Charitable Endowment Fund
Wire Cash	Donor Account Application	Call RJCEF for complete wiring instructions: 866-OUR-FUND (687-3863)

STOCK CERTIFICATES

Donor Account Application, certificate(s), Gift of Stock or Bond Certificates form, Stock/Bond Power form(s) and Raymond James form #1087 "Authority to Deposit Securities". (We suggest a mail method requiring a receipt and mailing the certificate(s) and Stock/Bond Power(s) in separate envelopes).

Submit original Letter of Instruction (see "Gift of Stock or Bond Certificate"). Endorse the Stock/Bond Power(s) exactly as name(s) appear certificate and we will complete the rest of the form. Sign one Stock/Bond Power per certificate. Photocopy the Stock/Bond Power as needed. Complete and submit the Raymond James form #1087 "Authority to Deposit Securities".

CASH OR SECURITIES HELD AT RAYMOND JAMES OR OTHER INSTITUTION

Raymond James Accounts	Donor Account Application and the Gift of Raymond James Brokerage Assets form.
Other Institutions	Donor Account Application and the original Gift of Brokerage Assets form. (not mutual funds)
Mutual Funds	Donor Account Application and original Gift of Mutual Funds Form. Check with fund company regarding signature guarantee requirements.
Dividend Reinvestment Plans	Donor Account Application and the letter of instruction. Call RJCEF for more information.

CONTACTING THE ENDOWMENT FUND

Mailing Address	Physical Delivery Address	Phone Numbers
P. O. Box 14407 St. Petersburg, FL 33733-4407	880 Carillon Parkway St. Petersburg, FL 33716	Toll-free: 866-OUR-FUND 866-687-3863 Fax: 727-567-8040

DONOR ADVISED FUND