

# Succession Plan Agreement for a Donor-advised Fund

#### WELCOME TO THE COMMUNITY FOUNDATION FAMILY

Organization:

Organization:

Organization:

Thank you for choosing the Community Foundation for Greater Atlanta. Our team is available to assist you at any time with a wide variety of services from creating your fund to ongoing grantmaking and charitable giving services. This document is intended to inform the Community Foundation of your desires regarding the succession plan of your fund after your death. If you have any questions about this agreement, please call our philanthropy team at 404.688.5525.

Donor-advised fund name							
Fund name:							
Succession plan							
You may request that po	ortions of your	planned gift be administered in an	y or all of the following	g ways. Total of percentages must equal 100			
Transfer the planne Community Founda	_	ommunity Foundation's unrestricted	d operating fund to he	lp support the ongoing activities of the			
% 0	of fund value						
Create or add to a d	donor-advised	fund for successor advisor(s) as lis	ted later in this agreer	ment			
% 0	of fund value						
Create a designated	d fund for the I	penefit of the nonprofit organizatio	n(s) named below				
% 0	of fund value	permanent fund	spend out over	years			
Organization:					%		
Organization:					%		
Organization:					%		
(if more, please add	a page)						
Create a named unr	restricted Com	mon Good Fund to help meet the §	greatest needs of the n	netro Atlanta area.			
% 0	of fund value						
Create a Field of Int	erest Fund to	nelp meet the greatest needs of the	e Greater Atlanta area i	in a specified field.			
% 0	of fund value	Field:					
Distribute	% of	the planned gift proceeds to the fo	llowing nonprofit orga	anizations:			

(2/18) cfgreateratlanta.org

## Succession Plan Agreement for a Donor-advised Fund



#### Succession advisors

Donors may designate individuals as successor advisor(s), who have privileges to make recommendations appropriate for the fund. A donor advisor may change this designation at any time by completing a new Succession Plan Agreement.

#### Successor advisor information

All fund correspondence will be sent to successor advisor 1, unless otherwise specified. If more than two advisors are desired, please attach additional information to this form. Furthermore, it is the responsibility of the designated successor advisor(s) to contact the Foundation at such time as he/she/they become donor advisor(s) to the fund.

Successor Advisor 1							
Full name (first, middle,	last)		Nicknan	ne	Preferred sal	utation (e.g. Mr.	James L. Smith or Jim Smith)
Home address			City			State	Zip
Date of birth	Send mailings to:	ome	Office	Add to mailing l	list for: Ir	vite to events	Send statement copies
Business or organization	on name		Position	1			
Business address			City			State	Zip
Preferred phone			Preferre	d Email			
Relationship with dono	or advisor						
Successor Advisor 2							
Full name (first, middle,	last)		Nicknan	ne	Preferred sal	utation (e.g. Mr.	James L. Smith or Jim Smith)
Home address			City			State	Zip
Date of birth	Send mailings to:	ome	Office	Add to mailing l	list for: Ir	vite to events	Send statement copies
Business or organization	on name		Position	1			
Business address			City			State	Zip
Preferred phone			Preferre	d Email			
Relationship with dono	or advisor						
I/We, as the donor(s), r	request that the successor a	advisor(s) r	named as	ssume this respo	nsibility		ng date/ f the current advisor(s)
I/We, as the donor(s), r	request that the fund be:		ained in o	one fund sp sors have discret		ween successor	r advisors ecial instructions attached

## Succession Plan Agreement for a Donor-advised Fund





#### Professional advisor

If you are working with a financial, tax or estate planning advisor to structure the succession plan to your fund, please complete the following:

Advisor name	Firm name	
Business address (line 1)	City	State Zip
Business address (line 2)	Business phone	Email



### Signatures

Fund Advisor	Name (please print) Signature	Date
Fund Advisor	Name (please print) Signature	Date
Community Foundation for Greater Atlanta	Name (please print)	Title
	Signature	Date

Have you created an estate or deferred gift to add to your fund after your lifetime?	⁄es	No
Do you want to talk to our director of gift planning about adding to your fund through an estate or deferred gift?	⁄es	No

cfgreateratlanta.org