



**OCEAN REEF**  
COMMUNITY FOUNDATION

## Fund Agreement

THIS AGREEMENT ("Agreement"), made this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,

between \_\_\_\_\_ (the "Donor")  
and the Ocean Reef Community Foundation, Inc., having its principal office in Key Largo, State of Florida,  
organized and operated exclusively for charitable purposes as that term is contemplated under Section  
501(c)(3) of the Internal Revenue Code.

I give and devise the sum of \_\_\_\_\_ dollars to the Ocean Reef Community Foundation, Inc.  
Said sum is to establish a donor advised or designated fund as indicated:

The fund shall be named The \_\_\_\_\_ Fund.

Donor Advised Fund.

Designated Fund to benefit the following specific charity/charities:

\_\_\_\_\_

The advisor(s) to the fund shall be: \_\_\_\_\_  
(Please note additional advisors and successor advisors may be added using Schedule B)

The Foundation may retain reasonable and proper compensation for its services and expenses.

Treasury Department regulations require that the Foundation's Board be vested with the power to modify a donor's restrictions when such restrictions become 'unnecessary, incapable of fulfillment or inconsistent' with the charitable needs of the community. This ensures that the donor's fund will continue to support worthwhile charitable programs and not a separate trust. The Fund shall be held and administered subject to the provisions of the Governing Instruments, including those provisions, which may permit the Foundation's Board to amend, modify or vary, and of the purposes, directions, restrictions or conditions set forth herein.

IN WITNESS WHEREOF, the Donor and the Foundation have executed this Agreement as of the date first above written.

DONOR SIGNATURE(S):

\_\_\_\_\_

OCEAN REEF COMMUNITY FOUNDATION, INC.:

By: \_\_\_\_\_



## Donor Advised Fund Guidelines

- It is recommended that Donor Advised Accounts be opened with a minimum of \$10,000.00.
- Funding is accepted by check, wire transfer and marketable securities (please contact the Foundation office for security transfer instructions). More complicated donations will be considered by the Board of Directors on a case by case basis. Contributions qualify for tax deduction in the year given, while your grants can be made at any time.
- Donors may appoint a Successor or Successors to designate gifts from the account.
- Gifts must be designated for any IRS qualified charity, a specific purpose or allocation can be included in the transmittal letter.
- Gifts may not be used for any private benefit, such as school tuition, dues or memberships, benefit tickets, fundraising dinners, your time or services, gifts to individuals, goods bought at auction or to fulfill pledges.
- Donor Advised Gift Forms can be obtained from the Foundation office or downloaded from the [www.orfound.org](http://www.orfound.org) website's "Giving" page. After receipt of your form, you will be notified when funds have been approved and distributed to the charities.
- Minimum Account Balance \$1,000.



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## Donor Advised Gift Form

- Please print legibly, providing as much information as possible (staff can assist by researching Federal Tax ID and other questions if need be).
- Gifts must be at least \$250 and in \$50 increments.
- Gifts may not be used for any private benefit, such as school tuition, dues or memberships, benefit tickets, fundraising dinners, your time or services, gifts to individuals, goods bought at auction or to fulfill a personal pledge.
- Gifts may be designated for a specific purpose or allocation, which will be included in the transmittal letter.
- Upon receipt of this form, the gift allocation request will be reviewed by members of the Board of Directors for approval. You will be notified when funds have been approved and distributed.

Please make a gift from the \_\_\_\_\_ Fund as follows:

Recipient Organization \_\_\_\_\_

Address \_\_\_\_\_  
Street Address City/State ZIP

Telephone \_\_\_\_\_ Federal Tax ID# \_\_\_\_\_

Amount of Gift \_\_\_\_\_ From:  Fund Name or  Anonymous

Special Allocation (please specify) \_\_\_\_\_

Preferred Date of Distribution:  A.S.A.P.  Future Date (please specify) \_\_\_\_\_

Have you previously recommended a gift to this organization?  Yes  No

Advisor Signature \_\_\_\_\_  
Authorized Signature Date