Designated Fund Application

Updated June 2023



Please follow the steps below to establish a JCF Designated Fund:

- 1. Fill out and sign the **Designated Fund Application**.
- 2. **Provide a Corporate Resolution** signed by two officers stating that the board has agreed to a) the establishment of the JCF fund, and b) the appointment of representatives empowered to act on behalf of the organization (see Authorized Parties–section C).
- 3. Transfer Assets-see <u>Ways to Contribute</u>.
- 4. Select asset allocation: Review the **Investment Performance Chart** and complete the **Fund Investment**. **Recommendation Form**.

For additional information on Designated Funds and to download forms referenced in this application, visit jcfny.org/designatedfunds.

A. DESIGNATED CHARITABLE ORGANIZATION

A designated fund is for the sole benefit of a 501(c)(3) public charity. All assets in the designated fund may only be granted to the charitable organization listed below.

Name of organization		
Tax identification number		
Name of contact	Title of contact	
Address		
City	State	Zip
Alternate verified address		
City	State	Zip
Phone	Email	
B. NAME OF FUND The organization has the privilege of naming the fund.		
Name of fund		
May we list the fund name in our Annual Report? Yes No)	

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C. AUTHORIZED PARTIES/SIGNATORIES

The organization must authorize individuals who will act on its behalf to obtain fund information, recommend grants to the designated charity, and make investment recommendations. Two Authorized Parties/Signatories must be board members/officers and one must be a member of the organization's senior staff. Additional Authorized Parties/Signatories may include organization's senior staff, board members, accountant, attorney or any other individual designated to obtain information regarding the fund. The organization may add or remove Authorized Parties at any time by submitting a Corporate Resolution. To add additional Authorized Parties, see **Authorized Parties Form.**

of	Authorized Pa	rties below must ad	ct jointly.			
Name 1			Name 2			
*Date of Birth (required for security purposes)		*Date of Birth (required for security purposes)				
Relationship to organization		 Relationship to organization				
Address		Address				
City	State	Zip	City	State	Zip	
Phone	Email		Phone	Email		
Sign grant reco	ential Information ommendations ot recommendations		Sign grant recor	ntial Information nmendations t recommendations		
Name 3			Name 4			
*Date of Birth (required for security purposes)		*Date of Birth (required for security purposes)				
		Relationship to organization				
Address		Address				
City	State	Zip	City	State	Zip	
Phone	Email		Phone	Email		
Receive Confidential Information Sign grant recommendations Sign investment recommendations		Receive Confidential Information Sign grant recommendations Sign investment recommendations				

D. IRREVOCABLE CONTRIBUTION

Estimated initial contribution S_	(minimum \$5,000)

Send check Wire cash Marketable Securities Mutual Fund Shares

For contribution instructions, please visit: <u>jcfny.org/charitable-assets-accepted</u>. Please notify us of the contribution you are sending using our Contribution Notification Form at <u>jcfny.org/contribution-notification-form</u>.

E. ACKNOWLEDGMENTS ON BEHALF OF THE ORGANIZATION

- ✓ We acknowledge that we have read the Policies and Procedures booklet and agree to its terms and/or conditions. We certify that all information in this application is accurate and complete and we will notify the Jewish Communal Fund by Corporate Resolution with any changes.
- ✓ We acknowledge that our appointed representatives are solely responsible for making investment allocations, and understand that JCF cannot be held responsible for the performance of the investments.
- ✓ We acknowledge that the only successor to the fund is the public charity designated in section A, and that assets from this fund must only be granted to the designated charity.
- ✓ We acknowledge that should the organization choose to solicit contributions for the Fund through an event with which there is an associated non-deductible portion, the organization must so inform the Jewish Communal Fund and we understand that the Jewish Communal Fund will not issue a tax substantiation letter for those contributions.
- ✓ We acknowledge that should the organization dissolve or lose its designation by the IRS as a 501(c)(3) not-for-profit organization, the officers of the organization, with the approval of the Jewish Communal Fund's Executive Committee, will grant the remaining funds to organizations with comparable mission statements.
- ✓ We acknowledge that all contributions to JCF are under JCF's legal control and cannot be reported on the organization's financial statements.

F. SIGNATURES

Two officers of the organization must sign below on behalf of the designated organization.

Signature ((Officer 1)	Title				Date	
Signature ((Officer 1)	Title				Date	
Acknowledg	ed for Jewish C	ommunal Fund by				Date	
How did the	organization he	ar about the Jewish Commun	al Fund? (c	hoose all tha	t apply)		
Advisor	JCF donor	Radio (CBS, Bloomberg, other)	Event	Mailing	Press	Online Search	Friend/relative
Name of per	son who referre	d the organization (so we can	send our th	nanks):			