

Please Print

Section One – Instructions

Please complete this form to create a **Classic Charitable Gift Fund** (“Fund”) with an irrevocable contribution of **\$25,000** or more to the **Charitable Gift Funds Canada Foundation** (“CGFCF/Gift Funds Canada”). Please review the Charitable Gift Fund Program Guide (“Program Guide”) for information on asset types that can be contributed. By signing this Agreement, you acknowledge that you have received and reviewed the Program Guide, you understand its terms, it forms part of this Agreement and you intend to create the Fund named in Section Three. Please submit the original version of this form and any other applicable documents, to your Financial Advisor for processing.

If you are working directly with CGFCF and **NOT** through a Financial Advisor, then please send the documents to: Gift Funds Canada, 645 Gardiners Rd., Ste. 202, Kingston, ON K7M 8K2

Section Two – Donor Information

There may be more than one Donor establishing the Fund (e.g., spouses, siblings, friends, relatives, etc.). Primary & Secondary Donors have full and equal rights to recommend grant disbursements and to elect successors of the CGF. All Fund correspondence will be sent to the Primary Donor of record unless otherwise instructed. The donation receipt(s) will be issued in the name of the Donor of the asset.

Primary Donor:

Corporation (if applicable)*		
Full Name (including title Mr., Mrs., Ms., Dr., etc)		
Mailing Address		
City	Province	Postal Code
Telephone (Home)	Telephone (Business)	
Fax	Email	
Date of Birth (mm/dd/yyyy)	Business # (if corporate donation)	
If the initial donation is from a corporation rather than an individual please provide the corporate name & address. Please provide a photocopy of a valid identification document (Passport, Driver's License, National Identity Card, Government Issued Age of Majority Card, Canadian Citizenship Card or Birth Certificate) in order to comply with federal regulations applying to registered charitable organizations.		

Secondary Donor:

Full Name (including title Mr., Mrs., Ms., Dr., etc)		
Mailing Address Same as above?		
City	Province	Postal Code
Telephone (Home)	Telephone (Business)	
Fax	Email	
Date of Birth (mm/dd/yyyy)		
Relationship to Primary Donor		
Please provide a photocopy of a valid identification document (Passport, Driver's License, National Identity Card, Government Issued Age of Majority Card, Canadian Citizenship Card or Birth Certificate) in order to comply with federal regulations applying to registered charitable organizations.		

Section Three – Name the Charitable Gift Fund

The name you set out below is the name of your Charitable Gift Fund as it will appear in correspondence including that sent to your recommended grant recipients. The name may be changed at your discretion by advising CGFCF in writing through your Financial Advisor or directly.

(Charitable Gift Fund Name)

Section Four – Description of Gifted Assets

Donation of Cash

I/We donate the following gift of cash to establish a Charitable Gift Fund (min. \$25,000)

by cheque

Your Financial Advisor will work with you to fund your contribution with a cheque. OR If you are working directly with CGFCF and not through a Financial Advisor, then make the cheque payable to Charitable Gift Funds Canada Foundation.

by transfer/direct deposit from my account

Your Financial Advisor will work with you to transfer your cash. OR Contact CGFCF to make arrangements, if you are NOT working with a Financial Advisor.

Donation of Securities

I/We donate the following securities* to establish a Charitable Gift Fund (min. \$25,000)

Security 1 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$
Security 2 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$
Security 3 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$
Security 4 (Name)	Ticker/Fund #	# of Shares/Units	Estimated Value \$

* If more than four securities are being contributed, attach a list of same with the information requested above to this form.

Section Five – Donor Designation of Gifted Assets

I/We the Donor(s) would like the assets used to establish a *Classic* Charitable Gift Fund and direct that these assets be handled in one of the following ways:

- None of the initial gift is immediately available for grant-making (*An annual spending policy calculation will be applied to the Fund's assets by the CGFCF Board of Directors to determine the amount to be available for grant-making* in the following calendar year.*); **OR**
- ___% of the initial gift is available for grant-making. (*This split must leave a minimum of \$25,000 in capital assets in the Fund. This option may be of interest to those donors who wish to have money available for grant-making in the near term. Minimum grant is \$250.00*)

Definitions:

*Available for grant-making refers to the total of any gift amount designated as "available for grant-making" plus the annual spending policy amount approved by Gift Funds Canada's Board of Directors less the value of grants made from the CGF.

Note: Assets identified for grant-making purposes, will be held by Gift Funds Canada in a centralized account. These monies are not allocated any portion of the CGFCF's operating costs and will not earn any additional income for the Fund. Designated amounts over 5% of the gifted assets may be subject to a four (4) month hold or a transaction fee before they are available for disbursement at the discretion of CGFCF.

Section Six – Recommend Investment Vehicle(s)

Please see and complete **Schedule 1** attached to the end of this form for investment choices for the capital in a **Classic Charitable Gift Fund**.

Section Seven – Appointment of Grant Advisors (Not required. Advisors may be named at a later date.)

Donors may appoint individuals* to advise, act for, or act with them on making grant recommendations (“Grant Advisors”). Grant Advisors will not succeed the donor(s) unless they are also named as CGF Successors.

- My Grant Advisor is aware of this appointment.

Full Name (including title Mr., Mrs., Ms., Dr., etc)		
Mailing Address		
City	Province	Postal Code
Telephone (Home)	Telephone (Business)	
Fax	Email	
Relationship to Primary Donor		

* If more than one Grant Advisor is being appointed, attach a list of same with the information requested above to this form.

Section Eight – Grant Acknowledgements & Recommendations (Not required.)

Grants are made from grantable funds in your Fund. Grant Acknowledgements & Recommendations may be submitted when completing this form or at a later date by completing a Grant Recommendation Form – available from your Financial Advisor or by download from the CGFCF website at www.charitablegiftfunds.ca.

- Grant Acknowledgements & Recommendations are attached.
- Grant Acknowledgements & Recommendations will be submitted at a later date.

Section Nine – CGFCF Operating Cost Allocation

CGFCF operating costs* are assessed against the invested capital of each Fund according to the following schedule:

Invested Fund Capital**	Annual Rate
\$ 25,000 to \$ 500,000	0.900 %
\$ 500,001 to \$ 1,000,000	0.850 %
\$ 1,000,001 to \$ 2,500,000	0.775%
\$ 2,500,001 to \$ 5,000,000	0.675 %
\$ 5,000,001 and above	Contact CGFCF for details

* Please note that the above costs do not include the investment advisory or management fees payable by CGFCF to Financial Service Providers. Rates are subject to change from time to time, without notice. There is a minimum monthly charge of \$20.

**Note that Invested Fund Capital does not include funds that are available for grant-making.

Section Ten – CGF Successors (Not required. Successors may be named at a later date.)

Donor(s) may name successors to their Fund. After the death or disability of the Primary Donor(s), Fund Successors will have authority to advise on the Fund and to give consent to any amendment or variation of any trust created by the creation of the Fund.

- Named successors will share equal responsibility for the Fund.
- The assets of the original fund will be split among the successors’ own CGFs.*
- I/We appoint as the successors to the Fund those persons who serve as the directors of the CGFCF, acknowledging that these persons change from time to time.**

Fund Successor #1:

Full Name (including title Mr., Mrs., Ms., Dr., etc)		
Mailing Address		
City	Province	Postal Code
Telephone (Home)	Telephone (Business)	
Fax	Email	
Date of Birth (mm/dd/yyyy)		
Relationship to Primary Donor		
Please provide a photocopy of a valid identification document (Passport, Driver's License, National Identity Card, Government Issued Age of Majority Card, Canadian Citizenship Card or Birth Certificate) in order to comply with federal regulations applying to registered charitable organizations.		

Fund Successor #2*:**

Full Name (including title Mr., Mrs., Ms., Dr., etc)		
Mailing Address		
City	Province	Postal Code
Telephone (Home)	Telephone (Business)	
Fax	Email	
Date of Birth (mm/dd/yyyy)		
Relationship to Primary Donor		
Please provide a photocopy of a valid identification document (Passport, Driver's License, National Identity Card, Government Issued Age of Majority Card, Canadian Citizenship Card or Birth Certificate) in order to comply with federal regulations applying to registered charitable organizations.		

*The assets will be divided equally among the successor funds as long as there is a minimum of \$25,000 in each new fund. ** If no successors are ever named then CGFCF will assume the role by default. If the directors of the CGFCF become the successors either through request or by default, then any subsequent grants will be made consistent with the donor's past grant recommendations and/or expressed areas of interest. *** If there are more than two (2) fund successors, please attach a list of same with the information requested above to this form.

Section Eleven – Authorizations & Understandings

Gift Funds Canada is a registered charitable organization (BN # 89671 3500 RR0001) in Canada and is governed by the terms and/or conditions contained in the **Program Guide**.

By signing this form, I/we authorize and direct the CGFCF to create a Fund with the property described in *Section Four* of this Agreement with the donation handled as per the designation in *Section Five*.

Grants will be disbursed from the Fund to a limit of the Grantable Funds. This feature is fully described in the Donor Guide, the content of which may be updated from time to time without notice.

I/We understand that this contribution made to Gift Funds Canada is an **irrevocable** gift that is not refundable to me/us for any reason. I/We also understand that I/we will be entitled to a donation receipt for the fair market value of the contribution. Once contributions have been accepted, they are the property of Gift Funds Canada, which is governed by an independent board of directors.

As the Donor(s), I/we understand that I/we may make written recommendations for grants to Qualified Donees consistent with Canada Revenue Agency regulations. I/We also understand that no grants may be made for any private benefit (for example dues, benefit tickets, etc.) or to support any political campaign activities.

While it is Gift Funds Canada's intention to fulfill the Donor's requests, I/we further agree that the CGFCF is legally responsible for determining the amount and recipient(s) of any grant(s). Gift Funds Canada may use the personal information I/we have and/or will provide (for example name, address, contact information, donation history and grant recommendations) to process my/our donations; administer its charitable services; establish and maintain a relationship with me/us, establish and manage my/our Charitable Gift Fund; verify my identity and protect against fraud; to satisfy regulatory obligations and other legal requirements.

In providing its charitable services, I/we understand that the CGFCF may have to share my/our personal information with other persons: where the other parties are grant recipients and I/we have consented to being recognized and identified as the Donor(s); where other parties are the CGFCF's third party service providers, suppliers or agents who assist the CGFCF in providing its services; and where it is required or permitted to do so by law.

Provided that no amendment or variation may be made to any trust created by the establishment of the Fund which would vary its charitable purposes, objects or qualification as a charity, the provisions of any such trust may be amended or varied with the written consent of CGFCF, together with the Primary Donor(s). After the disability or death of the Primary Donor(s), the person or persons designated as successors in respect of the Fund shall have the right to consent to any such amendment or variation with Gift Funds Canada.

To the best of my/our knowledge, all information disclosed is accurate, and I/we will immediately notify my Financial Advisor or the CGFCF if any changes occur. As the primary Donor(s), I/we also understand that Gift Funds Canada will allocate operating costs (as described in this Agreement) against the Fund and pay investment advisory or management fees in accordance with its policies and procedures, all in accordance with the directions given by me/us in this Agreement. My/our signature(s) below evidence my/our agreement and acceptance of all terms, conditions and options selected in all parts of this Agreement and its attachments.

Primary Donor's Signature

Date

Secondary Donor's Signature

Date

Section Twelve – To be completed by the Investment Advisor (If applicable)

Investment Advisor Name

Rep #: _____ Dealer #: _____ Branch #: _____

Company Name

Address

City _____ Province _____ Postal Code _____

Telephone _____ Fax _____ Email _____

Investment Advisor's Primary Administrative Contact on this CGF:

Assistant/Associate's Name

Title

Telephone _____ Fax _____ Email _____

SCHEDULE 1 – Recommend Investment Vehicles for Gift Capital

PLEASE CHECK THE APPROPRIATE OPTION:

OPTION 1: If a donor is **NOT** working with an Investment Advisor then the gift capital of the Charitable Gift Fund will be

invested in: Charitable Gift Funds Canada Foundation Connor, Clark & Lunn Balanced Pooled Fund 100%

OPTION 2: If a donor **is** working with an Investment Advisor and wishes to invest in a managed balanced portfolio, then please recommend investments for the enduring property assets of the Charitable Gift Fund in this section. **To a total of 100%:**

Direct Purchase & Managed Balanced Fund(s)*

Name: _____ %

Name: _____ %

* These recommendations are subject to review to insure their compliance with current CGFCF investment policies. Final acceptance of these recommendations rests with the CGFCF Board of Directors.

OPTION 3: If a donor **is** working with an Investment Advisor & wishes to invest in **Mutual Funds**, then please recommend investments for the enduring property assets of the Charitable Gift Fund from this section. **Select up to 4 funds, to a total of 100% - min. of 25% each:**

<input type="checkbox"/> AGF Canadian Balanced Fund (AGF280) _____%	<input type="checkbox"/> Mackenzie Balanced Fund (MFC436) _____%
<input type="checkbox"/> AGF Cdn Real Value Bal Fund (AGF783) _____%	<input type="checkbox"/> Mackenzie Univ Cdn Bal Fund (MFC724) _____%
<input type="checkbox"/> AIM Canadian Balanced Fund (AIM597) _____%	<input type="checkbox"/> Manulife Monthly High Income Fund (EPL583) _____%
<input type="checkbox"/> Axiom Balanced Income Portfolio (ATL975) _____%	<input type="checkbox"/> Meritas Balanced Portfolio Fund (SR1006) _____%
<input type="checkbox"/> Axiom Balanced Growth Portfolio (ATL986) _____%	<input type="checkbox"/> Meritas Monthly Div & Inc Fund (SR1007) _____%
<input type="checkbox"/> Bissett Cdn Balanced-A Fund (TML222) _____%	<input type="checkbox"/> RBC Balanced Fund (RBF272) _____%
<input type="checkbox"/> BMO Asset Allocation Fund (BMO145) _____%	<input type="checkbox"/> RBC Balanced Growth Fund (RBF553) _____%
<input type="checkbox"/> Caldwell Balanced Fund (CWF101) _____%	<input type="checkbox"/> RBC Advisor Select Bal Fund (RBF741) _____%
<input type="checkbox"/> CC&L Balanced Portfolio (CCL416) _____%	<input type="checkbox"/> Renaissance Cdn Balanced (TAL934) _____%
<input type="checkbox"/> CC&L Balanced Growth Portfolio (CCL419) _____%	<input type="checkbox"/> Saxon Balanced Fund-B (SAX645) _____%
<input type="checkbox"/> CC&L Growth Portfolio (CCL422) _____%	<input type="checkbox"/> Scotia Cdn Balanced Fund (BNS378) _____%
<input type="checkbox"/> CI Harbour Growth & Income (CIG691) _____%	<input type="checkbox"/> Scotia Selected Bal Inc & Growth (BNS341) _____%
<input type="checkbox"/> CIBC Balanced Fund (CIB477) _____%	<input type="checkbox"/> Standard Life Balanced-A Fund (SLM250) _____%
<input type="checkbox"/> Dynamic Value Balanced Fund (DYN9194) _____%	<input type="checkbox"/> TD Balanced Growth (TDB307) _____%
<input type="checkbox"/> Ethical Balanced (EFI064) _____%	<input type="checkbox"/> Trimark Global Balanced Fund (AIM1773) _____%
<input type="checkbox"/> Fidelity Cdn Balanced-A Fund (FID282) _____%	<input type="checkbox"/> Trimark Select Balanced (AIM1573) _____%
<input type="checkbox"/> Fidelity Cdn Asset Allocation (FID281) _____%	
<input type="checkbox"/> GGOF Cdn Balanced (GGF580) _____%	
<input type="checkbox"/> HSBC Cdn Balanced (HKB3496) _____%	
	TOTAL <u>100</u>

These recommendations are subject to review to insure their compliance with current CGFCF investment policies. If you wish to recommend other funds or fund classes other than those listed here, contact CGFCF to have them reviewed for compliance with the Foundation's Policies and Procedures. Final acceptance of these recommendations rests with Gift Funds Canada's Board of Directors.