

Non-Endowed Donor-Advised Fund Letter of Agreement

Date: _____

LaTida Smith, President
The Winston-Salem Foundation
751 West Fourth Street, Suite 200
Winston-Salem, North Carolina 27101-2702

Dear Ms. Smith:

I/We hereby establish a non-endowed advised fund that will help to carry out the purposes of the Foundation as set forth in its Declaration of Trust and any amendments or additions thereto.

The name of the fund will be the _____ Fund, and I/we hereby reserve the right to recommend future distributions from principal during my/our lifetimes and so long as I/we have capacity. Upon the earlier of my/our deaths or incapacity, any balance remaining in the Fund will be used at the discretion of The Winston-Salem Foundation Committee unless the donor(s) has/have a permanent endowment fund or provisions to create one. I/We understand that net income from the Fund will be retained by the Foundation on an annual basis and that a minimum balance of \$1,000 should be maintained in the fund.

I/We have read and further understand and concur with the *Donor-Advised Fund Guidelines*, including the fact that ultimate control of advised funds rests with The Winston-Salem Foundation Committee; any grant recommendations made by me/us are only in an advisory capacity. All non-endowed advised funds will be assessed an annual fee of \$120 to be paid from the fund at \$10 per month.

Donors or Fund Representatives' Signature(s):

The Winston-Salem Foundation, Trustee

LaTida Smith, President

Please enter the date and fund name (above), sign, and fill out the contact information below. You may fax, mail, or e-mail a scanned version to the Foundation.

Name(s)

Email(s)

Address

City, State, Zip

Home Phone

Cell Phone(s)

Business Phone(s)