



I/We, _____ (“Donor”) hereby request that The Community Foundation for Greater New Haven Inc. (“The Community Foundation”) retain _____ (“the Manager”) of _____ (Manager’s Firm) for purposes of managing the investment of the _____ (“Fund”).

I/We recognize that the suggested investment manager must be approved by The Community Foundation and must remain compliant with the program while the Fund is invested by the Manager.

DONOR RECOGNIZES:

1. Suggestions of a Manager are advisory only and The Community Foundation may approve or decline the above suggestion.
2. Donor may not receive a private benefit from the investment of Fund’s assets with the Manager.
3. Failure to comply with private benefit and conflict of interest provisions may result in an IRS regulation violation ending in legal and financial penalties to the Manager.
4. Investments are subject to normal market risks and volatility, and the Fund’s value will fluctuate.
5. Investment fees incurred by the Manager for managing, investing and rebalancing within the asset allocation model are deducted from the total return of the Fund. No additional investment management fees are assessed by The Community Foundation; however, an administrative fee will apply.

DONOR NAME DATE

ADDRESS CITY STATE ZIP

DONOR NAME DATE

ADDRESS CITY STATE ZIP