

# GRANT RECOMMENDATION

**INSTRUCTIONS:** Complete this form to recommend a grant of £200 or more from your donor-advised fund (DAF) to support a qualified charity.

## 1 DONOR-ADVISED FUND INFORMATION

FUND NAME \_\_\_\_\_ DONOR-ADVISED FUND ACCOUNT NUMBER (IF KNOWN) \_\_\_\_\_

## 2 GRANT DETAILS

### RECIPIENT ORGANISATION

CHARITY NAME \_\_\_\_\_ CHARITY NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

CONTACT PERSON AT ORGANISATION \_\_\_\_\_ TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### GRANT AMOUNT

AMOUNT (£200 MINIMUM) \_\_\_\_\_ Currency:  GBP  USD  EURO

### PURPOSE OF GRANT

In furtherance of the charitable purposes of the grantee organisation (default if no box is checked)

Other \_\_\_\_\_

### RECOGNITION

A letter accompanying your grant will be sent to your selected charity. Please indicate your preference for recognition.

Recognise Fund Name and Donor (default if no box is checked)  Anonymous

### TIMING

One-time Grant: Issue the approved grant as soon as possible

Recurring Grant: Issue the approved grant on a recurring basis as indicated below for the amount listed above. (Note: Recurring grants may be discontinued for insufficient funds, or if a notice to suspend is received.)

Quarterly  Every 6 months  Annually  Other \_\_\_\_\_

BEGINNING DD/MM/YYYY) \_\_\_\_\_ ENDING DD/MM/YYYY) \_\_\_\_\_

### SPECIAL NOTES

\_\_\_\_\_  
 \_\_\_\_\_

If you wish for your contact information to be given to the charity, please provide it in Special Notes section above.

## 3 ACKNOWLEDGEMENT OF TERMS

I understand that this is a recommendation and not a direction. I further understand that NPT UK reviews all grants to ensure that the organisation is a qualified charity under relevant UK regulations, and that the purpose of the grant is charitable in nature. NPT UK may deny a recommendation if the grant does not meet criteria for approval. By signing below, I acknowledge that this grant will not:

- Provide more than an incidental benefit, good or service to any specific individual, myself or related entities.
- Pay for dues, membership fees, tuition, goods from a charitable auction or other goods or services.
- Support a political campaign or lobbying activity, an individual or a private non-operating foundation.

PRIMARY/JOINT/AUTHORISED SECONDARY ADVISOR SIGNATURE \_\_\_\_\_ DATE (DD/MM/YYYY) \_\_\_\_\_

NAME (PRINT) \_\_\_\_\_

### RETURN TO [forms@nptuk.org](mailto:forms@nptuk.org)

You should also submit a grant recommendation online via DonorView.

For more information | [enquiries@nptuk.org](mailto:enquiries@nptuk.org) | +44 (0)800 133 7540 | [www.nptuk.org](http://www.nptuk.org)