



voice 703.535.3563 fax 703.535.3564 www.donorstrust.org

Grant Distribution Request Form (Please Print)

Instructions: *Grant Distribution Request Forms* should be emailed to dtgrants@donorstrust.org or faxed to 703-535-3564. Grants are processed on a weekly basis with checks being issued within 3 – 7 business days of receipt. Please note that *Grant Distribution Request Forms* for new organizations may take longer to process as each must be approved by the DonorsTrust Board of Directors prior to receiving any funds.

Section A: Donor-Advised Fund Information. All authorized fund holders must sign each <i>Grant Distribution Request Form</i> . Primary Advisor Name		
Donor-Advised Fund Name		
Authorized Signature(s)		Date
Section B: Grant Request. Grants can only be made to certain IRS approved 501(c)(3) organizations. No person or entity may receive a benefit that is other than incidental as the result of a grant. In no case may a grant satisfy a pre-existing legally binding pledge. Please contact us for additional information.		
Organization _		
Contact Name _		
Mailing Address _		
City, State, Zip		
Grant Amount _		(\$100 minimum grant)
Section C: Anonymity. Choose one of the following options to identify this grant distribution: Anonymous Fund Name and Full Name		
	☐ Fund Name Only	☐ Fund Name, Full Name, and Mailing Address
	tions. Please specify grant instructions. General Operations	ctions. □ Special Project (please provide a description)
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