



UPDATE YOUR DONOR-ADVISED FUND

Please complete the applicable sections of this form and return to service@growyourgiving.org.
Changes are subject to review and approval by the Greater Kansas City Community Foundation.

If you wish to change how your Fund is invested or name a new financial advisor to manage the assets in the Fund, please complete and return a new Investment Recommendation Form or log in to your fund online and submit changes under the "Investments" tab.

1 Your Fund Name Please provide the name of the Fund currently on file at the Community Foundation.

Name of Fund

Fund ID

2 Change Fund Name If you'd like to change the name of the Fund, provide the new name here.

New Name of Fund

3 Add a Fund Advisor If you'd like to add a new Fund Advisor, please provide their information here. You can name additional Fund Advisors in Section 8.

Fund Advisors:

- make recommendations for all Fund-related matters, including grants and investments.
- have online access to view fund statements and recommend grants.

First Name

Middle Name or Initial

Last Name

Suffix

Preferred Name or Nickname *(if different than first name)*

Date of Birth

Address

☐ Home ☐ Work

City

State

Zip Code

Phone

☐ Home ☐ Work ☐ Cell

Email Address

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Add a Successor Advisor

If you'd like to add a new Successor Advisor, please provide their information here. You can name additional Successor Advisors in Section 8.

Successor Advisors make grant and investment recommendations for the Fund after the Fund Advisors are no longer able or willing to do so.

First Name	Middle Name or Initial	Last Name	Suffix
Preferred Name or Nickname <i>(if different than first name)</i>		Date of Birth	
Address	<input type="checkbox"/> Home <input type="checkbox"/> Work	City	State Zip Code
Phone	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	Email Address	
Relationship to Fund Advisor(s)			

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Change Successor Advisor Recommendation

Completing this section will change how your Successor Advisors will act in the future. This section is only applicable if you've named more than one Successor Advisor.

Please indicate how you would like Successor Advisors to act when making recommendations for the Fund in the future.

Select one:

☐ Independently ☐ By Majority

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Add An Authorized Party

Use this section to name individuals who can access fund information. These individuals will have online access to view the Fund activity, including balance, contribution and grant history. You can name additional individuals in Section 8.

First Name	Middle Name or Initial	Last Name	Suffix
Organization		<input type="checkbox"/> Check here to give this individual permission to communicate your grant requests.	
Email Address		<input type="checkbox"/> Check here to give this individual permission to communicate your investment recommendations.	
Relationship to Fund Advisor(s)			

First Name	Middle Name or Initial	Last Name	Suffix
Organization		<input type="checkbox"/> Check here to give this individual permission to communicate your grant requests.	
Email Address		<input type="checkbox"/> Check here to give this individual permission to communicate your investment recommendations.	
Relationship to Fund Advisor(s)			

First Name	Middle Name or Initial	Last Name	Suffix
Organization		<input type="checkbox"/> Check here to give this individual permission to communicate your grant requests.	
Email Address		<input type="checkbox"/> Check here to give this individual permission to communicate your investment recommendations.	
Relationship to Fund Advisor(s)			

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Remove Someone From Your Fund

To remove an individual from your fund, please provide their information here. This will terminate their access to the Fund.

First and Last Name
First and Last Name
First and Last Name

Signature	Date
Printed Name	
Signature	Date
Printed Name	