## DAF Investment Advisor Program (IAP) Agreement

## **RAYMOND JAMES** Charitable

RJ Charitable Service Center e Sign. I Scan

02784	
Form #	FA #
Branch #	Speed Dial #

Account Information						
RJ Charitable DAF Account Name	DAF Fund ID #					
O This is my initial IAP Agreement for a NEW donor a O This is a request to update my existing IAP Agreem O This is a request to CHANGE my current DAF invest O This is an IAP Agreement to be used in the future (	nent stment choice to	the IAP option				
Nominated Financial Advisor (FA) Information						
FA Name		FA #	Branch	#		
FA Phone Number F	A Email					
Fees						
The Investment Advisor Program (IAP) fee structure includes Fee, and is based on the daily average market value of the			Fee plus the	e Financial Advisor		
The Administration Fee is determined by the following an	nnual schedule:					
<ul> <li>0.55% on the first \$500,000</li> <li>0.40% on the next \$500,000</li> <li>0.20% on the next \$1.5M</li> <li>0.15% over \$2.5M</li> <li>If the market value of the account falls below \$500,000, the</li> </ul>	e minimum annual	fee is \$2,750 or \$229.	17 per mon	th.		
The <b>Financial Advisor Fee</b> for this DAF account is:	% (may not exceed 1.0%)					
Depending on the investment approach chosen, additional expense ratios, or third-party manager fees (i.e. AMS, RJC chosen investment approach and any additional fees, if approach and any additional fees, and approach and any additional fees, and approach and any additional fees, and approach and approach and additional fees, and approach approach and approach and approach and approach and approach and approach approach approach and approach approach approach and approach approach approach approach approach and approach ap	CS, Eagle). The Fil	nancial Advisor is respo				
Investment Allocation Target (please select one objective):	O Income (0-2	0% equity) 🔾 Inco	ome Primar	y (21-40% equity)		
Balanced (41-60% equity)	Growth Prim	ary (61-80% equity)	Growt	h (81-100% equity)		
<b>Liquidity Reserve</b> : Please note that accounts using the 1% of the assets be held apart from the invested funds it to cover fees and any near-term grants to charity. Please the Liquidity Reserve for the near-term grants and fees (material)	n the money mark indicate the <i>initial</i> p	et Liquidity Reserve ercentage to hold in		%		
Donor Advisor Signatures						
By signing below, I acknowledge that I have read the curre and this Investment Advisor Program (IAP) Agreement an fee arrangement described above.						
Donor Signature	Donor Print Name			Date		
Joint Donor Signature (if applicable)	Joint Donor Print Na	me (if applicable)		Date		

To Be Completed By Financial Advisor							
By signing below, you acknowledge that you have read the current Raymond James Charitable Donor Advised Fund Disclosure Brochure, the Investment Advisor Program (IAP) Investment Guidelines and this Investment Advisor Program (IAP) Agreement and agree to the terms and conditions described therein, and agree to the fee arrangement described above.							
Are you the donor/donor advisor or a family member of the donor/donor advisor?	C	Yes	O	No			
Are you the successor donor advisor or a family member of the successor donor advisor?	$\mathbf{C}$	Yes	$\mathbf{O}$	No			
For the purposes of this program, a family member is defined as a spouse, ancestor, child, grandchild, great grandchild; spouses of a child, grandchild, and great grandchild; brothers and sisters (of whole or half-blood) and brothers' and sisters' spouses. Per IRS rules, financial advisors that are related to the donor advisor may not be compensated for their services.							
Financial Advisor Signature				Date			

FA#

Please contact <a href="mailto:RJCharitable@RaymondJames.com">RJCharitable@RaymondJames.com</a>, toll free 866-687-3863 or ext. 77221 with any questions.

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