Nonprofit Fund Agreement

Establish a New Fund Update Fund Information			Community Foundation of West Texas www.CFWTx.org		
Name of Fund					
e.g., ABC Nonprofit Fund Affiliate:					
Nonprofit Information			Primary Contact Information	apply.)	
Nonprofit Name			 Fund Advisor Individual has including grant recommendati other fund administration advi Secondary Advisor Individual 	ions, naming of successor sory privileges	advisors and
Tax ID			recommendations but no othe Fund Representative Indivative advisory privileges	er fund administration advi	sory privileges.
Mailing Address			Name	Male	Female
City	State	Zip	Title		
Phone (main number)	Fax		Mailing Address		
Website			City	State	Zip
Referred to Community Fou	ndation of Wes	Texas by	Business Phone	Fax	
Nonprofit Board Contact Information Role: (Check all that apply) Board Member (One board meming Fund Advisor Secondary Advisor		red)	Email Address Nonprofit Contact Informat Role: Fund Advisor	tion (CFO or Treasurer is	s recommended)
Name	Male	Female	Secondary Advisor Fund Representative		
Title			Name	Male	Female
Mailing Address			Title		
City	State	Zip	Mailing Address		
Phone	Fax		City	State	Zip
Email Address			Phone	Fax	
			Email Address		

Nonprofit Fund Agreement

Initial Gift to Establish a Fund \$ Your initial gift may be paid in the form of:	Nonprofit Signatures:		
Check made payable to the Community Foundation of			
West Texas	Nonprofit Primary Contact Signature		
Wire*	, , , , , , , , , , , , , , , , , , , ,		
* Contact the community foundation at (806)762-8061.	Print Name		
Distribution Type	r mit Name		
Endowed: Annual distribution is restricted to the community foundation's spending policy.	Date		
Nonprofit endowment funds are established through irrevocable contributions from a nonprofit that are maintained by the community foundation in perpetuity.	Nonprofit Board Contact Signature		
The annual payout is based on policy set by the community foundation's Board of Directors.	Print Name		
Distributions to begin:(at least one year from date fund established)	Date		
Number of distributions per year: (at least one, but no more than once per quarter)	Community Foundation of West Texas Signatures:		
 Non Endowed: Entire fund balance is available for grantmaking. Distribute \$ annually 	President Signature		
Distribute% annually	Print Name		
Other:	Date		
Variance Power	Y		
The community foundation board shall have the power to modify any restriction or condition on the distribution of funds for any specified charitable purposes or to specified	Authorized Board Member Signature		
organizations if, in the sole judgment of the board, such restriction or condition becomes, in effect, unnecessary,	Print Name		
incapable of fulfillment, or inconsistent with the charitable needs of the community or area served.	Date		
Anonymity and Publicity The community foundation includes information about fund advisors, grantees and funds in our print and on-line materials. If your organization would like anonymity, indicate below. Do not include the nonprofit fund name on fund listings.	Special Instructions:		
We are willing to be featured in the community foundation's	Please return this form to:		

Acknowledgement

print and online publications.

We acknowledge that we have read the Community Foundation of West Texas Nonprofit Endowment Fund Terms and Conditions and Support Fees and Minimums and agree to the fees, terms and conditions described therein. We hereby certify, to the best of our knowledge, all information presented in connection with this form is accurate, and we will notify the community foundation promptly of any changes.

___ We are willing to be interviewed for media stories

Community Foundation of West Texas

6102 82nd Street, #8b Lubbock, TX 79424

Phone: (806)762-8061

Questions? Contact the Community Foundation of West Texas at michelle@cfwtx.org or call (806)762-8061