



Establish a succession plan

Use this form to craft or change a succession plan for your account. A succession plan details what will happen to your account when all current account advisors are unable or unwilling to manage account processes.

If you do not select a succession plan, remaining account assets will be transferred to The Philanthropic Impact Fund.

If you require extra space, include additional sheets. Please do not staple.

For more information, refer to our *Policies & guidelines* booklet.

Contact us
with questions

888-383-4483
donorservice@vanguardcharitable.org

1 Account information

Account number	Account name	Fund
A	The	

2 Succession plan

Select any combination of succession options and assign a percentage of your account's remaining assets. If a succession plan is not in effect, remaining account assets will be transferred to The Philanthropic Impact Fund.

If checked, complete Section 2a. ▶	Option 1: Pass current account privileges to others. Retain the assets in your account and appoint up to two successor-advisors.	%
	Option 2: Create new accounts. Divide account assets equally and create one or more new accounts, each with up to two successor-advisors. The minimum initial amount for each account is \$25,000.	%
If checked, complete Section 2b. ▶	Option 3: Recommend final grants to charity. Recommend one or more charities receive a final, lump-sum grant from your account. All grants are subject to review and approval at the time the succession plan is enacted.	%
If checked, complete a <i>Recommend an Endowed Grant Plan</i> form. ▶	Option 4: Establish recurring grants with an Endowed Grant Plan. Recommend recurring grants based on a percentage of the account's balance. This option is not in effect until Vanguard Charitable receives a completed <i>Recommend an Endowed Grant Plan</i> form, which is available at vanguardcharitable.org/forms .	%
	Option 5: Transfer assets to The Philanthropic Impact Fund. The Philanthropic Impact Fund (PIF) issues grants that elevate the philanthropic industry. PIF works to help donors make informed granting decisions and educates nonprofits on providing effective and efficient solutions to increase capacity and capability.	%
Total must equal 100%. ▶		Total 100 %

2a. Successor-advisors

If you selected **Option 1** or **Option 2** as a succession plan, name successor-advisors here. Minors may be named as successors, but they cannot assume account privileges until they reach the age of majority. In the interim, a trusted legal guardian can administer account activity.

Successor-advisors cannot be current advisors on the same account.

Successor-advisor A

Name <i>salutation, first, middle initial, last</i>		
Title <i>if applicable</i>		
Birth date <i>mm-dd-yyyy</i>	Preferred phone	
Street address or P.O. box number		
City	State	Zip
Email address		
Relationship to current account advisors		

Successor-advisor B

Name <i>salutation, first, middle initial, last</i>		
Title <i>if applicable</i>		
Birth date <i>mm-dd-yyyy</i>	Preferred phone	
Street address or P.O. box number		
City	State	Zip
Email address		
Relationship to current account advisors		

2b. Nonprofit organizations

If you selected **Option 3** as a succession plan, name nonprofit organizations here. To nominate more than two charities, include additional sheets, signed and dated.

Fractional percentages of funds are acceptable.

Specify the percentage to be granted to this charity.

► **Organization A** %

Grants are made payable to charity's legal name, which may differ from its common name.

Charity information

Charity legal name		EIN <i>if available</i>	
Street address or P.O. box number			
City		State	Zip
Preferred phone	Web address		

Grant purpose

General operating expenses
Other:

Grant recognition

Account name only No contact information	Anonymous No identifying or contact information
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Specify the percentage to be granted to this charity.

► **Organization B** %

Grants are made payable to charity's legal name, which may differ from its common name.

Charity information

Charity legal name		EIN <i>if available</i>	
Street address or P.O. box number			
City		State	Zip
Preferred phone	Web address		

Grant purpose

General operating expenses
Other:

Grant recognition

Account name only No contact information	Anonymous No identifying or contact information
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3 Required signatures

By signing below, I confirm that the succession plan indicated in **Section 2** represents my wishes for the administration of the account when all current account advisors are no longer willing or able to serve. I understand Vanguard Charitable remains the sole owner of and has full discretion over the account. I acknowledge that I have read and agree to abide by the terms and conditions set forth in Vanguard Charitable's *Policies and guidelines* booklet.

In addition, I certify on behalf of all authorized parties on this account that:

- no individual(s) will receive any **impermissible benefit** in connection with a grant. This includes, but is not limited to, tickets or admission to events, museums or sporting events, goods at charitable auctions, dues, and tuition. This also includes goods or services that, if rendered or received in exchange for a donation, would reduce the donor's charitable deduction.
- no individual(s) will claim a **charitable deduction** for grants made by Vanguard Charitable, even if the recipient charity sends a receipt.
- a grant will not fulfill a legally binding **pledge**. A pledge is a promise to make a gift. If you are not sure if you have a legally binding commitment in place, please contact Vanguard Charitable.
- a grant will not support a scholarship where any donor, account advisor, or interested party on this Vanguard Charitable account has a role in selecting the recipient(s) of the scholarship, or where any donor, account advisor, or interested party on the account or anyone related to any such donor, account advisor, or interested party is an eligible recipient. I understand that all grants to support a scholarship are subject to the control and discretion of the recipient organization.
- a grant will not support a specific mission, missionary project, or named missionary who is related to me or any other donor, account advisor, or interested party to this account. I understand that all grants to support a specific mission, missionary project, or named missionary are subject to the control and discretion of the recipient organization.
- if a grant is for a supporting organization, neither I nor any other authorized parties on the account, nor any parties related to me, or to any other authorized parties on the account, directly or indirectly control any supported organization of the recommended grant recipient.

Account advisor A

An account advisor must sign here. ▶

Name <i>first, middle initial, last</i>	
Signature X	Date <i>mm-dd-yyyy</i>

Return information

Return this form and required documentation to Vanguard Charitable. If the document has a Signature guarantee or Medallion signature guarantee, it must be mailed.

Email: donorservice@vanguardcharitable.org
We recommend encrypting the form and sharing the password with us.

Phone: 888-383-4483

Fax: 866-485-9414

Mail: P.O. Box 9509
 Warwick, RI 02889-9509

Registered, certified or overnight mail: 2670 Warwick Avenue,
 Warwick, RI 02889-9509