

Harris Charitable Fund Program

Contribution Agreement

Complete this form to make an initial contribution of \$25,000 or more, or an additional contribution of \$5,000 or more to your donor-advised fund. If your employer matches contributions to charities with donor-advised fund programs, please include the appropriate paperwork from your employer. Additional forms are available at www.HarrisCharitableFund.com. You may also contact National Philanthropic Trust (NPT), the administrator and sponsor of the Harris Charitable Fund Program, toll free at (888) 344-3454.

1. Donor-Advised Fund Information

Fund Name

Primary Advisor

2. Donor Information

Identify all registered owners of the assets being donated. (Note: A Contribution Receipt, which is provided by NPT for federal tax reporting purposes, will be sent to the person(s) or trust listed below.)

Individual(s)

Mr. Mrs. Ms. Dr.

First Name, MI, Last Name

Date of Birth

Street Address

City

State/Zip

Email

Primary Telephone #

Mr. Mrs. Ms. Dr.

First Name, MI, Last Name

Date of Birth

Street Address

City

State/Zip

Email

Primary Telephone #

Trust (A copy of the Trust Agreement with any amendments must accompany all initial contributions from trusts.)

Name of Trust Agreement

Trust Date

Trustee Name (first, middle initial, last)

Primary Telephone #

3. Transfer Instructions

Check	Cash	Stock, Mutual Funds, Bonds
<p>Make payable to: National Philanthropic Trust</p> <p>Mail to: Harris Charitable Fund Program c/o National Philanthropic Trust 165 Township Line Road, Suite 150 Jenkintown, PA 19046</p>	<p>Bank: UBS AG ABA # 026007993 A/C Title: UBS Financial Services A/C Number: 101-WA-258641-000 F/C A/C Title: National Philanthropic Trust F/C A/C Number: PY23900</p>	<p>Brokerage Firm: UBS Financial Services For Benefit of: National Philanthropic Trust DTC Number: 0221 A/C Title: National Philanthropic Trust A/C Number: PY23900</p>

4. Assets

Refer to the instructions in the **How to Make a Contribution** form or call Harris Charitable Fund Program's philanthropic advisor, NPT, at (888) 344-3454 for assistance. If you are transferring stock, mutual funds or bonds, attach a **copy** of the **Letter of Authorization** indicating where the assets are held. Send the **original Letter of Authorization** to the firm at which the assets are held.

Cash \$ _____ By Check By Wire
Dollar Amount

Stock

Name of Stock _____
Trading Symbol _____
Number of Shares **OR** All Shares

Name of Stock _____
Trading Symbol _____
Number of Shares **OR** All Shares

Name of Stock _____
Trading Symbol _____
Number of Shares **OR** All Shares

Mutual Funds

Name of Mutual Fund _____
Trading Symbol _____
Number of Shares **OR** All Shares

Name of Mutual Fund _____
Trading Symbol _____
Number of Shares **OR** All Shares

Name of Mutual Fund _____
Trading Symbol _____
Number of Shares **OR** All Shares

Bonds

_____	_____	_____
Name of Bond	CUSIP	Quantity or Face Amount
_____	_____	_____
Name of Bond	CUSIP	Quantity or Face Amount
_____	_____	_____
Name of Bond	CUSIP	Quantity or Face Amount

Physical Certificates

Mail **Physical Certificate** and **Irrevocable Stock or Bond Power** with **medallion guarantee** under separate cover to Harris Charitable Fund Program at the address below.

Restricted Stock, Privately Held Stock, and Real Estate

For assistance, please call the administrator and sponsor of the Harris Charitable Fund Program, NPT, toll free at (888) 344-3454.

Grant or Transfer from Private Foundation or Donor Advised Fund

\$ _____ By Check By Wire
 Estimated Dollar Amount

5. Acknowledgement of Terms (All donors or trustees named in Section 2 must sign below)

I understand that my gift of the property described in Section 4 is an irrevocable and unconditional contribution when received and accepted by National Philanthropic Trust (NPT), and that NPT retains exclusive legal control over contributed assets. I acknowledge that I have read the Harris Charitable Fund Program Guidelines and agree to the terms and/or conditions contained therein. I certify that, to the best of my knowledge, all information in connection with this contribution agreement is accurate and I will notify NPT in writing of any changes.

 Donor or Trustee _____
 Date

 Donor or Trustee _____
 Date

6. Return this completed form and other required documentation by mail or fax to:

Harris Charitable Fund Program c/o National Philanthropic Trust | 165 Township Line Road, Suite 150 | Jenkintown, PA 19046
Fax: (215) 277-3029