Wichita Falls Area Community Foundation New Fund Worksheet – Updated January 2024

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New Fund Worksheet

Fund Name:				
Type of Fund:	Agency	Designated	Donor Advised	Fiscal Sponsorship
	Legacy	Other:		
Choose One belo	ow:			
Endowed:	Annual Spendi	ng Rate (currently	4.5%) available for g	rants (Min \$25,000 balance)
Non endo	wed: 100% ava	ilable for grants (s	ee Fee Schedule for I	Fund Balance Minimums.)
How did you hear	about the Wicl	nita Falls Area Cor	nmunity Foundation?	
<u>Fund Advisors:</u> Authorized Individ	lual #1			
Last Name:	Last Name:			
Company/Nonpro	ofit Org (if applic	able):		
EIN No. (if applicable):			Office Held:	
Address:			City, State, Zip:	
Phone:				
Email:				
Date of Birth			Fund Statements	Online? OY or ON
Authorized Individ	lual #2			
Last Name			First Name:	
Company/Nonpro	ofit Org (if applic	able):		
EIN No. (if applicable):			_Office Held:	
Address:			City, State, Zip:	
Phone:				
Email:				
Date of Birth			Fund Statements	Online? OY or ON

Fund Advisors will receive an email with login information to set up online access to the Fund through the Fund Advisor Portal. After initial setup, Fund Advisors can log in via wfacf.org. Email notifications will be sent when Quarterly Fund Statements are posted in the Portal unless the Fund Advisor requests statements to be mailed.

Organization Information (for Agency/Designated Funds):

Organization Name:	EIN No:
Address:	City, State, Zip:
Phone: E	mail:
Website:	
Amount of the initial Gift to the Fund will be:	
Check	Property Other:
Charitable Intent of the Fund will be:	

Successor Advisors:

Husband and wife usually succeed one another as advisors. After they have both passed, one generation can be named as successor advisors. The fund can also become endowed upon the advisors passing and granted out according to the funds historical donations.

For organizations and nonprofits, successor advisor(s) will be the person(s) who hold the office(s) designated in the original fund agreement.

If no successor advisors are named, you can choose to create a legacy fund to continue making an impact after your passing. I/We would like more information on creating a legacy fund: yes no

Please list successor advisor(s) below:

Name:		_Address:	
Relationship:	Phone: _		
Email:			
Name:		_Address:	
Relationship:	Phone:		
Email:			

Is WFACF and/or your fund in your planned giving? If so, please provide the information below. Would you like more information on planned giving? yes no

Legacy/Planned Gift Int	formation:	
Attorney Name:		
Executor/trix Name:		
Address:	Phone:	
Email:		
Location of Will:		
Return the worksheet to:	Wichita Falls Area Communi	y Foundation
	2405 Kell Boulevard, Su Wichita Falls, TX 76308	
Scan and email to:	wfacf@wfacf.org	Fax: 940-766-2861

wfacf@wfacf.org

Fax: 940-766-2861