



After completing all sections for each grant recommendation, please mail to: The Seattle Foundation, 1200 Fifth Avenue, Suite 1300, Seattle, WA 98101-3151, or fax to: (206) 622-7673. You may also make grant recommendations online. Please contact your philanthropic advisor at (206) 515-2111 for more information.

Name of Donor Advised Fund:

Address:

Phone:

Philanthropic Advisor:

Date:

Email:

Grant recommendations are considered for approval on a weekly basis.

I/We understand that The Seattle Foundation has final authority to approve this grant recommendation, consistent with its charitable purposes. I/We represent that this recommended grant will not be used to satisfy a pledge, purchase a table or ticket for a fundraising event, or otherwise provide more than an incidental benefit to donors, donor advisors or related parties. Thank you for your consideration of our grant recommendation.

Signature of Advisor

Date

Signature of Advisor

Date

The Seattle Foundation Grantmaking Program Participation

You may make a grant recommendation to support the Foundation's Grantmaking Program, which invests in nonprofit organizations in King County that contribute to a healthy and vibrant community. We aim to build a healthy community by supporting effective and efficient organizations in all seven elements of our Healthy Community framework. More information about each element and the Foundation's Grantmaking Program is available at www.seattlefoundation.org.

- ☐ Please transfer \$_____ from my/our Fund to support the Foundation's Grantmaking Program.
- ☐ Please contact me about transferring _____% of my/our Fund's market value on an annual basis to support the Foundation's Grantmaking Program.
- ☐ Please contact me about partnering with the Foundation to support specific elements of the Healthy Community framework or specific grant proposals.



Name of Donor Advised Fund:

Donor Advised Grant Recommendation #1

Organization Name:

Address:

Contact Name and Title:

Phone/Email:

Grant Amount:

Purpose (if other than general support):

Donor Advised Grant Recommendation #2

Organization Name:

Address:

Contact Name and Title:

Phone/Email:

Grant Amount:

Purpose (if other than general support):

Donor Advised Grant Recommendation #3

Organization Name:

Address:

Contact Name and Title:

Phone/Email:

Grant Amount:

Purpose (if other than general support):

*** Reminder: The Seattle Foundation cannot make grants to pay for memberships, pledges, tickets to fundraising events or to provide other benefits to donors, donor advisors or related parties.**