



**Brooklyn Community Foundation
Grant Recommendation Form**

Name of Donor-Advised Fund _____

Name of Fund Advisor(s) recommending the grant(s): _____

Daytime Phone Number: _____ Date: _____

As an advisor to the above-named Fund, I recommend the following grant(s):

<i>Name of Organization Address</i>	<i>Amount (minimum \$250)</i>	<i>Purpose (if not general operating)</i>

- I am recommending a grant of \$ _____ to the Brooklyn Community Foundation for the:
 - Community Fund (supports the Foundation's strategic grantmaking)
 - _____ (name of special initiative/project of the Foundation)

Recognition (please select how you would like the organization to be notified of your grant):

- Fund Advisor and Address: Fund Advisor name, with Fund Advisor's address provided to the charity

_____ *Name(s) and address(es) as you would like to be acknowledged in grant award letter*

- Fund Holder Only: Fund Advisor Name, with Fund Advisor's address withheld from the charity.

_____ *Name(s) as you would like to be acknowledged in grant award letter*

- Fund Name Only: Fund Name only, with Fund Advisor Name and address withheld from the charity

- Full Anonymity: all Fund details including name of Fund, Fund Advisor, and contact information withheld from the charity.

I understand that this is only a recommendation and that the Brooklyn Community Foundation will perform its own review of the charitable organizations I have recommended and will retain decision-making authority to act in accordance with its policies and charitable purposes. I certify that, if approved, the above grant(s) will not satisfy any existing legally-enforceable pledges or obligations made by me or my family members to the recommended charitable organizations; and that no such charitable organization will, in consideration of the payment of any of the above grants provide any more-than-incidental benefit (including tickets, memberships with more-than-incidental benefits, goods or services or tuition) to me or anyone related to or affiliated with me.

Signature _____

Grant recommendations must be submitted on this form. Please fax, scan or mail to:
 Brooklyn Community Foundation fax: 718.722.5757
 Attn: Julia Metro email: jmetro@bcfn.org
 1000 Dean Street, Suite 307
 Brooklyn, NY 11238