

Interested party access

Use this form to authorize a family member, successor-advisor, professional advisor (such as an attorney, financial advisor, or accountant), or other interested party to have access to your philanthropic account.

This form may also be used to remove an interested party and change their access level. For an explanation of interested party access levels, please see page 3.

To authorize additional individuals to access your account, complete a second form.

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

Contact us with questions

donorservice@vanguardcharitable.org

1 Account information

Account number	Account name	
A	The	Fund

2 Identify changes

Add new interested party Complete sections 1, 3, and 5				
Update current interested party information Complete sections 1, 3, and 5				
Change current interested party access level Complete sections 1, 3, and 5				
Remove interested party Complete sections 1, and 4 or 5				

3 Add or Update interested party

Role of interested party					
• •					
Professional advisor Family member/f	riend C	ther			
Access level see section 6 for description					
Full access Read-only + Exchange Read-only			per stat	ement	
Name salutation, first, middle initial, last		Last 4 di	gits of	SSN or	PIN
Gender		Birth date mm-dd-yyyy			
Male Female Other					
Preferred phone Alternate phone					
Business Home Mobile	Busines	ss F	Home	Mobile	
Mailing address or P.O. box number					
City			State	Zip	
Email address		Preferr	ed conta	ct method	
		Em	nail	Phone	Mail
Relationship to account advisor(s)					

If checked, the interested party must have full account access.

Name this person as the primary contact for the account.

As an authorized user on the account named in Section 1, I:

- verify that the information in Section 3 is complete and accurate,
- understand that I will only be eligible to act on the responsibilities designated in Section 2,
- understand Vanguard Charitable is a public charity that offers a donor-advised fund, and all
 account assets are the property of Vanguard Charitable and not of the account advisors or
 interested parties, and
- acknowledge I have read and agree to abide by the terms and conditions in the *Policies & guidelines* booklet, including policies for recommending grants.

An interested party receiving full or read-only account access must sign here.

Signature of interested party	Date mm-dd-yyyy
X	

4 Remove interested party

Interested parties removing themselves from an account must sign here.

Name salutation, first, middle initial, last	Last 4 digits of	SSN or	PIN
Signature of interested party	Date mm-dd-yyyy	′	
X			

Form continues on next page 2 of 3

5 Required signatures

By signing below, I authorize Vanguard Charitable to release information and/or provide access to the account named in **Section 1** to the interested party named in **Section 3**. If an individual is named in **Section 4**, I authorize Vanguard Charitable to remove them from the account named in **Section 1**.

	Account advisor A				
	Name first, middle initial, last				
	Signature	Date mm-dd-yyyy			
	X				
Only one signature needed.	Account advisor B				
	Name if applicable first, middle initial, last				
	Signature	Date mm-dd-yyyy			
	X				

6 Access level overview

	Full	Read-only + Exchanges	Read-only	Paper Statement
Receive paper quarterly statements only				✓
Receive paper or online quarterly statements depending on delivery preference	✓	✓	✓	
Request account information such as balance, transaction status, and history	✓	✓	✓	
View account information and statements online	✓	✓	✓	
Reset individual password online	✓	✓	✓	
Select a delivery preference (electronic or paper) for communications	✓	✓	✓	
Edit personal contact information online	✓	✓	✓	
Recommend exchanges online or over the phone	✓	✓		
Recommend grants online or with paper form	✓			
Request address changes for account advisors	✓			
View/receive confirmations of contributions, grants, exchanges and other account activity, if designated as the primary contact on the account	√			
Request changes to the account name, advisors, or succession plan	n/a	n/a	n/a	n/a
Link their own Vanguard and Vanguard Charitable accounts	✓	✓	✓	

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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

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