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# INVESTMENT RECOMMENDATION FORM

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YouthBridge Community Foundation's investment program offers the flexibility to customize your Fund's investments to meet your charitable goals, whether they are immediate or long term.

Please select either Option 1 or Option 2 on the following pages for your Fund's investments.

Return in one of the following ways:  
Mail to **12977 N. Forty Drive, Suite 368, St. Louis, MO 63141**; or  
Email to **operations@youthbridge.org**.

For questions, please call **314-985-6778** or email **info@youthbridge.org**.



**Bridging Resources and Community Needs**  
[www.youthbridge.org](http://www.youthbridge.org)

# YOUTHBRIDGE COMMUNITY FOUNDATION INVESTMENT RECOMMENDATION FORM

Name of Fund \_\_\_\_\_

Fund ID \_\_\_\_\_

## OPTION ONE

**The assets in the Fund will be invested in YouthBridge’s Investment Pools.**

Select an investment strategy from the options listed below. Allocations are rebalanced to targets once a month. In the interim, cash coming into the Fund will be held in a Money Market Pool.

		<b>MORE RISK</b> Long-Term Goals Lower Spending Rate			<b>LESS RISK</b> Short-Term Goals Higher Spending Rate	
Mix Options →		CAPITAL APPRECIATION	BALANCED	CONSERVATIVE	RISK ADVERSE	CUSTOM MIX*
<b>Investment Pools</b>	<b>Domestic Equity</b>	56%	40%	24%	0%	
	<b>International Equity</b>	14%	10%	6%	0%	
	<b>Fixed Income</b>	30%	50%	70%	0%	
	<b>Money Market</b>	0%	0%	0%	100%	
	<b>Total</b>	100%	100%	100%	100%	100%

\* Combined total must equal 100%.  
Minimum Fund balance of \$100,000 required for Custom Mix.

**OPTION TWO**

**The assets in the Fund will be invested separately in a financial advisor managed account on your advisor’s platform. A minimum Fund balance of \$100,000 is required.**

Your financial advisor will be contacted to set up the investment account. A Fund Advisor or family member may not be named as the Fund’s financial advisor.

_____		_____	
Financial Advisor Name		Firm Name	
_____		_____	_____
Street Address		City	State      Zip Code
_____		_____	
Phone Number		Email Address	

**Online Fund Access for Financial Advisors** *Complete if selecting Option 2.*

With your permission, your financial advisor can have online access to view your Fund information, including balance, contribution and grant history.

Check here to give your financial advisor access to view your Fund online.

**TERMS AND REQUIRED SIGNATURES**

**For assets in a financial advisor managed account:** The assets in the Fund will be managed directly by the named financial advisor on a discretionary basis, until such time that YouthBridge Community Foundation or the Fund Advisor(s) exercise(s) the option to make a different selection for management of this Fund. The named financial advisor will manage the assets of this Fund in accordance with the Fund Advisor(s)' charitable objectives and the most current financial policies and standards of YouthBridge Community Foundation, which can be found at [www.youthbridge.org/advisor-guidelines](http://www.youthbridge.org/advisor-guidelines). YouthBridge Community Foundation will regularly review the financial performance of this Fund.

**For assets in YouthBridge Investment Pools:** The responsibility for managing YouthBridge Community Foundation’s investment program is vested in YouthBridge Community Foundation’s Board of Directors through its Investment Committee. The percentages in the mix options may change from time to time upon Investment Committee review.

As required by IRS regulations:

- a) the investment recommendation is advisory only and YouthBridge may, at its sole and absolute discretion, follow or decline to follow the recommendation;
- b) YouthBridge may at any time, at its sole and absolute discretion, change the investment of all or any portion of the assets in the Fund;
- c) if the investment recommendation is accepted, the investments will be administered in accordance with the financial policies and fiduciary standards of YouthBridge; and
- d) investments are subject to normal market and interest rate fluctuation risks, and any gain or loss generated by the above investments will be credited or charged to the Fund.

_____	_____	_____
Donor Signature	Printed Name	Date
_____	_____	_____
Donor Signature	Printed Name	Date
_____		_____
Accepted by Barbara Carswell, CEO YouthBridge Community Foundation		Date