



## SUB FUND ESTABLISHMENT FORM

**Thank you for choosing to become part of Into Our Hands Community Foundation. (IOH)**

Please complete this form to request the establishment of a named sub- fund with IOH.

The form seeks information that will assist IOH in understanding your vision and preferences.

Background information and a summary of policies relating to the establishment and maintenance of a sub fund with IOH are provided in the sub fund guidelines. A copy of the sub fund guidelines will be sent to you one the sub fund is established and approved by the IOH board.

### 1. Type of Fund

- **Into Our Hands PUBLIC FUND ABN 74193767461**

The Public Fund is a public ancillary fund (PuAF) and tax deductible trust fund. It can make grants to charitable organisations endorsed by the ATO as having tax concession charity (TCC) and Item 1 DGR (Deductible Gift Recipient) status. It can also make grants to exempt organisations that would be charitable but for their connection with government and which are item 1 DGRs, (e.g. some hospitals)

- **Into Our Hands Community Foundation Ltd ABN 14160630491 is trustee for the OPEN FUND.**

The open fund is a non-tax deductible charitable trust fund. It can make grants for charitable purposes to organisations and to individuals; essentially it can make grants to projects and people if the project is charitable at law and recognised to benefit the community.

The donor requests a sub fund be maintained by Into our Hands for the recording of gifts from the donor and from others and for the recording of grants from the sub fund.

Please select which fund type you would like your sub fund in.

**Into Our Hands PUBLIC FUND  
ABN 74193767461**

**Into Our Hands Community  
Foundation Ltd OPEN FUND  
ABN 14160630491**



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### 2. NAME OF SUB-FUND

**YOU MAY REQUEST A NAME FOR YOUR SUB-FUND. THIS CAN BE AFTER YOURSELF, YOUR FAMILY, A LOVED ONE, OR A RELEVANT CAUSE OR ISSUE OR YOUR BUSINESS.**

**SUB-FUND NAME**

### 3. FUND CATEGORY

<b>Individual</b>	<input type="checkbox"/>
<b>Family</b>	<input type="checkbox"/>
<b>Group of like-minded individuals/ cause connected</b>	<input type="checkbox"/>
<b>Corporate/ business</b>	<input type="checkbox"/>
<b>Local Government</b>	<input type="checkbox"/>
<b>Not for Profit ( future fund)</b>	<input type="checkbox"/>
<b>Source of Referral</b> <i>Please leave name and comment</i>	

### 4. PRIMARY CONTACT INFORMATION

<b>Name:</b>	<input type="checkbox"/> <b>Mr</b>	<input type="checkbox"/> <b>Ms</b>	<input type="checkbox"/> <b>Mrs</b>	<input type="checkbox"/> <b>Other</b>	
<b>Address</b>					
<b>Telephone</b>					
			<b>Mobile</b>		
<b>Email</b>					



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### SECONDARY CONTACT / SUCCESSOR

<b>NAME:</b>		<b>MR</b>	<b>MS</b>	<b>MR S</b>		<b>OTHER</b>	
<b>ADDRESS</b>							
<b>TELEPHONE</b>		<b>MOBILE</b>					
<b>EMAIL</b>							

### SUB FUND ADVISORY COMMITTEE (OPTIONAL)

THE SUB FUND CONTACT MAY ESTABLISH AN ADVISORY COMMITTEE WITH DEVELOPING GRANT MAKING GUIDELINES OR FOR SUPPORT WITH FUNDRAISING AND GRANT MAKING REQUESTS. ADVISORY COMMITTEES ARE NOT SEPARATE LEGAL ENTITIES. THEY ARE NOT REQUIRED TO BE INCORPORATED AND CAN ONLY MAKE RECOMMENDATIONS TO THE IOH BOARD FOR GRANTS. IF YOU WISH TO RUN YOUR FUND VIA AN ADVISORY COMMITTEE PLEASE SUBMIT COMPLETE AN ADDITIONAL FORM NAMING YOUR COMMITTEE MEMBERS AS REGISTERED PERSONS WITH THE FUND.

### 5. ESTABLISHMENT DONATION (SUB-FUNDS CAN BE ESTABLISHED WITH A MINIMUM DONATION OF \$1000)

*THE DONOR PROPOSES TO MAKE UNCONDITIONAL GIFTS TO THE INTO OUR HANDS COMMUNITY FOUNDATION, STARTING WITH A TOTAL GIFT OF:*

\$	
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Please indicate donation method.

- Cheque made payable to Into Our Hands Community Foundation
- EFT – Please contact the foundation to make a direct deposit.

\$
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\$
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Account Name:  
BSB No:  
Account No:

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<b>FUND Statement of Purpose</b>	
<b>Proposed causes/ beneficiaries / areas of interest for grant-making.</b>	

### 6. INVESTMENT APPROACH

THE DEFAULT INVESTMENT APPROACH FOR FUNDS ESTABLISHED IS ONE SEEKING LONG TERM CAPITAL APPRECIATION AND GROWTH FOR THE FOUNDATION.

<b>Flow Through Fund</b> – ie granting out corpus funds regularly	<input type="checkbox"/>
<b>Endowment</b> – ie granting income from your fund or maintaining the corpus with aim of growing the fund to support perpetual grant making.	<input type="checkbox"/>

### 7. SUB FUND RECOGNITION

THE FOUNDATION PROMOTES THE GRANT MAKING IN ITS PUBLICATIONS AND ONLINE VIA WEBSITE AND SOCIAL MEDIA . THIS INCLUDES GRANT MAKING AND SUB- FUND ACTIVITIES. WE ALSO RECOGNISE SUB FUNDS AND THEIR GRANTS VIA LETTERS OF OFFER AND GRANT AGREEMENTS WITH BENEFICIARIES.

<b>PLEASE INDICATE IF YOU WOULD PREFER TO REMAIN ANONYMOUS.</b>	<input type="checkbox"/>
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### 8. FUTURE OF THE SUB FUND/ BEQUEST

INTO OUR HANDS ENCOURAGES DONORS TO HAVE WRITTEN PLANS FOR THE SUB- FUND ONCE THEY ARE NO LONGER ABLE TO BE INVOLVED (THROUGH A STATEMENT OF WISHES)

PLEASE CONTACT THE FOUNDATION TO DISCUSS THIS PROCESS OR IF YOU ARE INTERESTED TO LEAVE A BEQUEST TO A SUB- FUND OR ALTERNATIVELY YOU CAN INDICATE YOUR PREFERENCES BELOW:

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<p><b>Yes</b>, I plan to leave a bequest in my will to Into Our Hands, to be added to a sub-fund or the public fund</p>	<input type="checkbox"/>
<p><b>I am not sure</b> – if I will be leaving a bequest to Into Our Hands and I would like more information about bequests and this process.</p>	<input type="checkbox"/>

### 9. SUCCESSION

<p>I request that IOH discontinues the named sub-fund and places the remaining funds in the Public Fund pool for Foundation grants.</p>	<input type="checkbox"/>
<p>I request that IOH continues the named sub-fund and grants 4% of the net assets attributed to the sub-fund annually back to causes/ organisations and initiatives in line with my priority funding areas.</p>	<input type="checkbox"/>

### 10. CONDITIONS

#### SUB-FUNDS

The donor acknowledges:

- 1) donations form part of the Trust Fund of Into Our Hands Community Foundation and once accepted by the Trustee represents an irrevocable donation to the Foundation and are not refundable.
- 2) The gifts to the Foundation Do not form a separate fund
- 3) the assets will not be invested separately from the Trust Fund
- 4) the assets will not be separately accounted for in the statutory financial statements of Into Our Hands Community Foundation, although separate management accounts in respect of the assets will be maintained for the purposes of internal management and identification
- 5) at the end of the financial year the Trustee will provide the balance on funds held and the income distributable



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- 6) distributions occur after annual audit
- 7) the Trustee will administer in accordance with the Public Ancillary Fund Guidelines 2011
- 8) The Trustee may at any time cease to maintain a sub- fund and account for the money and investments in the general account for the Trust Fund.
- 9) Into Our Hands is a perpetual charitable Trust and the capital may not be accessed without order by the Supreme Court, therefore, withdrawal of the seed donation and subsequent donations is **not** an option without approval by the board and in line with tax and charity regulations and laws.
- 10) The trustee is required to distribute a minimum of 4% of the net assets held in the Trust Fund annually, based on the net assets of the previous financial year.
- 11) If required ( by law or ATO recommendation) the Trustee may change the name of the sub-fund or can consider a request from he donor to change a sub fund name or statement or purpose.

### Grants

- 12) The trustee is not required to respond to any request or indicated preference to make a grant in accordance with a request or preference.
- 13) The trustee may invite the donor to make requests or indicate preferences at certain times but this is not a requirement.

<b>DONOR</b>			
SIGNED:		DATE:	
NAME:			
<b>TRUSTEE</b>			
<b>SIGNED ON BEHALF OF INTO OUR HANDS COMMUNITY FOUNDATION LIMITED</b>			
SIGNED:			
DATE:			