Whenever an endowed fund is to be established, this worksheet should be utilized and completed. It will serve as a guide to help ensure all pertinent information is gathered and facilitates the production and accuracy of the initial draft of the MOU that is the next step in the process.

INSTRUCTIONS

A. Worksheet should be completed by the institutional Development Officer or his/her designee.

B. Complete all sections, providing detail as appropriate/requested.

C. QUESTIONS? Outright Gifts - Contact the University System of Maryland Foundation, Inc. (301) 445-2712
   Planned Gifts - Contact the Office of Planned Giving (301) 445-2720

------------------------------------------------------------------------------------------------------------------------------------

SECTION I - DONOR(s):

Name ________________________________
Address ________________________________________________________________
City _________________________________ State ____________________________ Zip ______________
Phone (_____) _________________
Donor is:  _____ Alumni  _____ Friend  _____ Corporation  _____ Foundation
  _____ Other ____________________________

SECTION II - FUND NAME:

Note: A fund may be named to honor the donor(s) or others they designate.

Fund Name: ______________________________________________________________

Type of Fund:  _____ Memorial (in memory of someone deceased) Who? Relationship?

  ________________________________

  _____ Tribute (in honor of someone living) Who? Relationship?

  ________________________________

  _____ Other ________________________________

SECTION III - PURPOSE:

The fund is designated to be used: (check the appropriate categories)

  _____ for a specific USM campus (Identify) _____________________________________

  _____ for a specific dept/program (Identify) _____________________________________
where needed most throughout the University System of Maryland

PURPOSE (continued)

Identify what the fund is to be used for and restrictions, if any:

- Faculty support (i.e., academic chair, professorship, fellowship, prize, lectureship, travel fund, award, research support, etc.)
- Student support (i.e., Regents Fellowship/Scholarship, need-based scholarship, merit-based scholarship, fellowship, student loan fund, annual prize, travel fund, research support, etc.)
- Special projects and programs (i.e., library collections/book funds, equipment funds, institutes, centers, concerts, seminars, concerts, exhibits, etc.)

Describe fully: __________________________________________

_____________________________________________________

_____________________________________________________

SECTION IV - FUNDING:

Is this a pledge? _____ a gift? _____ Total amount of pledge/gift: $ ______________

Will there be any matching gifts associated with this fund? _____ Yes _____ No

If yes, identify the source of the match (i.e., employer, State of MD, federal government) and how it will be matched.

Kind of contribution: (check the appropriate categories)

- Cash
- Securities
- Bequest
- Gift-in-kind
- Life Income Plan
- Insurance policy
- Lead trust
- Other

If Other, please describe __________________________________________

How will payment be made?

- One-time gift of the total amount pledged. Expected date of gift: ____________________________
- Multiple payments (indicate how often payments will be made and the amount of the payments):
  Date of 1st payment: ____________________________ Amount: $ ______
  Subsequent payment intervals: ____________________________ Amount: $ ______

Will the fund be open to receive additional contributions in the future? _____ Yes _____ No

SECTION V - ADMINISTRATION OF THE FUND:

Note: The $ total of an endowed fund must be $10,000 before Spendable Income monies can be released.

When is the first award from the fund to be made?

- As soon as possible
- When the fund reaches $ ______________________ (If donor designates a $ total in excess of $10,000 before release of $)
____ Upon death of the donor(s)
____ Other
The recipient/program to receive Spendable Income from an endowment fund may only be decided by appropriate designated University System of Maryland officials. The donor may be included in deciding who those officials will be, and may designate specific instructions for them, (i.e., selection criteria for award recipients).

Who will make the decisions? ____________________________________________________________

Who will administer the fund? ___________________________________________________________

Specific instructions / criteria? __________________________________________________________

The USM Foundation's standard policy regarding endowed funds is that appreciation and interest income over and above expenditures from the fund are returned to the principal, absent an alternative agreement in the MOU.

Do the donors agree with this standard policy? _____ Yes _____ No (If No, detail the instructions below)

SECTION VI - RECOGNITION, PROMOTION AND REPORTING:

Donors who contribute at gift levels specified either by the institution or the USM receive special recognition. Recognition may be given in the form of Presidents Club and/or Heritage Club membership, personal letters from the appropriate institutional president or the Chancellor, or some other form. Recognition can be given quietly (as in the case of anonymous donors), publicly, or not at all, depending on the wishes of the donor(s).

Does the donor wish to be anonymous? _____ Yes _____ No

Does the donor agree to recognition in the form of appropriate announcements be made to news media, internal and external publications and other forms? _____ Yes _____ No

What kind of recognition is acceptable to the donor?

_____ Public  _____ Private  _____ None  _____ Other (Explain below)

SECTION VII - REQUIRED SIGNATURES:

Customarily, agreement to the conditions of an MOU must be confirmed by signatures of the donor(s), the institutional president, the dean of the affected school, and the director or chair of the affected department. The president of the USM Foundation must also sign the MOU.

Who will sign the MOU? (Check the appropriate categories and supply the appropriate names and titles)

_____ President ___________________________ Institution Name ___________________________

_____ Director ___________________________ Program Name ___________________________

_____ Dean ______________________________ College/School _________________________

_____ Chairman _________________________ Department ____________________________

_____ Other (Identify) ____________________ ___________________________________________
Who is coordinating the drafting and review routing for this MOU?

Name ___________________________________________ Phone ____________________________
Title _____________________________________________
Address ___________________________________________
__________________________________________________
__________________________________________________

Note: Signature routing for the three "final" copies of the MOU will be coordinated by the designated person at the appropriate Office of Institutional Advancement. Once the final copies are signed by the donor(s) and institutional representatives they are routed to the UMF business office for signature by the USM Foundation President.

Additional Information/Instruction: