

Date: _____

Neale Gonsalves

Senior Philanthropic Advisor

Tides Foundation

PO Box 29903

The Presidio

San Francisco, CA 94129-0903

USA

Dear Neale,

I have requested that _____ (#) shares (minimum value \$1,000) from _____ (Investment Co. Name) be gifted to your organization.

I understand that, upon receipt, it is your policy to sell these shares. Please direct these funds to your Tides Canada Exchange Fund (#1481) for international grant-making.

I wish to request that Tides Foundation make a grant recommendation to Tides Canada Foundation, in Vancouver, in favor of:

Name of Charity: _____

Charity Address: _____

Charitable Number: _____

Name of Contact at Charity: _____

Contact Email Address: _____ **Phone Number:** _____

Purpose: _____

Recognition (anonymous or by name): _____

I certify that this recommendation is not intended to be used to satisfy a personal economic obligation or pledge made by the Donor, a Relative of any of the donor, or a Controlled Entity. I further certify that it is not intended to be used to make any loans, pay compensation, reimburse expenses, make any similar payments, or result in more than an incidental benefit to the Donor, any Relative of the Donor or any Controlled Entity. (Examples of grants that result in more than an incidental benefit include, but are not limited to, grants to purchase tickets for, or tables at, charitable events, and grants for membership in certain organizations.)

Should Tides Foundation decide to make a grant recommendation according to my request, I understand that Tides Foundation will retain an administrative fee of 2% (subject to change with notice) of my gift of shares. The remainder will be available for grant disbursement.

Thank you for considering this request.

Sincerely,

Donor Name *Donor Signature*

Donor Address *City* *State* *Zip Code*

Donor Telephone *Email Address*

Contribution Transmittal Form

How to prepare: Before initiating a transfer of securities or bank wire to Tides Foundation, please complete and fax this form to (415) 561-6401, or mail to the address below. You or your financial representative must provide correct information prior to the transfer to avoid crediting delays and possible fluctuations in the trading price of the stock.

Fund Advisor(s): _____

Fund Name: _____

Contribution Type:

Wire Transfer in the amount of \$ _____

Wire Information

Bank Name: Wells Fargo Bank
ABA#: 121000248
Account Name: Tides Foundation – Depository Account
Account #: 4518101969

Stock Transfer (*Securities transferred electronically to Wells Fargo Investments*)

Stock Transfer Information

Financial Institution: First Clearing, LLC
DTC #: 141
Account Name: Tides Foundation
Account #: 7273-1505

Name of security

Number of shares

Long Term Funds only:

Amount or % held in grant making account: \$ _____

Amount or % transferred to investment account: \$ _____

Date contribution due to arrive at Tides Foundation: _____

Signature: _____

Date: _____

Phone: _____

Email: _____

If you have questions or need further information, contact Byron Miranda, Jr. Staff Accountant, (415) 561-6326.