

ImpactAssets Donor Advised Fund Application

Please complete this application and email <u>clientservice@impactassets.org</u> to request a secure messaging link. For paper submissions, please send the application to us at **4340 East West Highway, Suite 210, Bethesda, MD 20814.**

Please indicate the name of the ImpactAssets contact (if any) that you have been working with:

Name of ImpactAssets Contact

Donors

The Donors of the account have full and equal rights to recommend grant distributions and to elect the successors of the account. If the Donor is a trust, please include the full name of the trust as Donor #1 and the trustee name as Donor #2. There can be more than two Donors. (*Please attach additional sheets if necessary.*)

 Email	Mo	ther's Mai	den Name	 Email		N	other's Ma	aiden Name
Business Phone	Но	me Phone		Business F	Phone	H	lome Phon	e
City	State	Zip/P	Postal Code	City		State	Zip,	Postal Code
Home Address (mus	st not contain F	P.O. Box)		Home Add	dress (must	not contair	n P.O. Box)	
Social Security No.	Da	te of Birth		Social Sec	curity No.		Pate of Birt	h
Name (First, Middle	, Last)			Name (Fir	st, Middle,	Last)		
Mr. Mrs.	☐ Ms.	☐ Dr.	Other	☐ Mr.	☐ Mrs.	☐ Ms.	☐ Dr.	Other
Donor #1 (Primary recipient for all account communication)				Donor #2				

Donor Notifications

You will receive email notifications that your statement is available for download unless you check the box(es) below to receive paper statements. Statements are posted quarterly to our DonorWeb portal. If you select paper statements, you will receive printed annual statements. ImpactAssets does not mail statements on a quarterly basis. Contribution acknowledgment letters will be available to donors on the DonorWeb portal.

	Donor 1: I wish to receive annual paper statements instead of electronic.
\Box	Donor 2: I wish to receive annual paper statements instead of electronic

ImpactAssets Donor Advised Fund Account Name

Please choose a name for your ImpactAssets Donor Advised Fund account. You can name it after yourself, your family, or your cause (for example, "The Castillo Family Philanthropy Fund for Land Conservation"). All outgoing correspondence regarding your account will include the account name and the name and address of the primary Donor(s), unless you request anonymous correspondence.

	Donor Advised Fund	d Account Name			
Please use th	is section to indica	ate a Donor mailing add	dress different th	an home address:	
Donor #1			Donor #2		
Mailing Addres	ss		Mailing Addres	ss	
City	State	Zip/Postal Code	City	State	Zip/Postal Code
Advisors	5				
		th a professional advisc t? There can be more t			
_	_			(Trease attach ade	artional sheets if fieces.
Yes	☐ No (If NO, pleas	se move on to the Contrib	ution Section.)		
Advisor Name			Title	Firn	n
			City	State	Zip/Postal Code
Mailing Addres	SS		•		
	ss			2	
	ss		Daytime Phone	Э	
Email	Name (if applicable))		Э	
Email)		Э	
Email Broker-Dealer	Name (if applicable)			9	
Email Broker-Dealer Advisor No Your advisor	Name (if applicable)	notifications that your	Daytime Phone		d unless you check the
Email Broker-Dealer Advisor No Your advisor oelow to rece	Name (if applicable) tifications will receive email give paper statements	notifications that your	Daytime Phone	lable for download	d unless you check the
Email Broker-Dealer Advisor No Your advisor below to rece	Name (if applicable) tifications will receive email eive paper stateme	notifications that your ents.	Daytime Phone statement is avai	lable for download	d unless you check the
Email Broker-Dealer Advisor No Your advisor below to rece	Name (if applicable) tifications will receive email eive paper stateme wishes to receive a	notifications that your ents. nnual paper statements i ould have Full or Read	Daytime Phone statement is avai	lable for download	d unless you check the
Advisor No Your advisor below to rece My advisor Select whethe	Name (if applicable) tifications will receive email eive paper statement wishes to receive a er your advisor sh	notifications that your ents. nnual paper statements i ould have Full or Read	Daytime Phone statement is avai	lable for download	d unless you check the

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participate in the Professionally Managed Account program, please check this box.

Contribution Section

Initial Contribution

Please note that the minimum initial contribution is \$25,000. Please contact us at <u>clientservice@impactassets.org</u> or 855-482-2946 if you plan to contribute digital tokens, physical share certificates, real estate or other property or non-traditional assets.

Contributor/Donor Information

Without accurate contributor/donor details, we are unable to sell shares, if applicable, nor are we able to associate the funds with your donor advised fund account. We are required to collect sufficient support to record the contribution and issue an acknowledgement letter. If you do not know the details of your contribution at this time, please complete the Contribution Form once the information is available.

A letter of receipt will be issued by ImpactAssets to the donor(s) listed on this application OR the donor(s) listed below. If the contribution is from a trust or another legal entity, please provide the name and address of the trust/legal entity so that we can accurately document this in the receipt. If the contribution is being processed through another Donor Advised Fund provider, include the name of the provider as the donor (i.e. My Town Community Foundation).

Please select	t one of the fo	mowing two options	S:				
		cation should be acknowle					
Contributor/	Donor details belo	DW.					
Contributor	/Donor#1		Contri	ibutor/Do	nor #2		
☐ Mr. ☐ M	∕lrs. ☐ Ms.	☐ Dr. ☐ Other	☐ Mr.	☐ Mrs.	☐ Ms.	☐ Dr.	☐ Other
Name (First, Mic	ddle, Last)		Name (F	irst, Middle,	Last)		
 Mailing Address	;		Mailing /	Address			
City	State	Zip/Postal Code	City		State	Zip/	Postal Code
 Email	Н	ome Phone	 Email		H	lome Phone	e
Timing of Fu	ınding						
On what date	do you anticipat	e sending this funding	to ImpactAs	ssets?			

For Cash Contributions	5		
\$		(Please make check payable to Ir	mpactAssets and mail it with the Advised Fund account application)
Check			
\$			
Wire		Bank of Origination	
\$			
Funded by another DAF Pr	ovider	Name of DAF Provider	
Wire Instructions: Please coinstructions.	ontact ImpactAssets at <u>clients</u>	service@impactassets.org or	855-482-2946 for wire
For Securities or Mutua	al Fund Contributions		
Note: You will need to initia by your bank or financial ins		rith the holding firm. Addition	al paperwork may be required
ImpactAssets Brokerage Ad DTC#: 0164, Code 40 Custodian: Charles Schwab & Beneficiary Account Name: Beneficiary Account Numbe	& Co, Inc. ImpactAssets Inc.		
Holding Firm Informat	ion		
Name of Firm Holding Assets		Account Number	
	Ticker Symbol	Quantity	Approximate \$ Value
Security Name	Ticker Symbol	Quantity	Approximate \$ Value
Security Name	Ticker Symbol	Quantity	Approximate \$ Value
Security Name	Ticker Symbol	Quantity	Approximate \$ Value
Security Name	Ticker Symbol	Quantity	Approximate \$ Value

Notes:

- Shares should be transferred in kind and are not to be liquidated until they are received by ImpactAssets.
- Physical stock certificates may require a Third Party Release Form and additional paperwork. Please contact ImpactAssets for additional information.

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Approximate Total \$ Value

Succession Plan Section

Donors have the option of:

- 1. Supporting ImpactAssets' fund, which will be used to create jobs, preserve the environment, promote sustainable development, improve healthcare, build homes, and change lives worldwide;
- 2. Electing individuals to succeed them on the account with full rights as Donors;
- 3. Or, recommending charitable organizations to receive the remaining assets, as the beneficiary upon the death, incapacity or other disqualification of ALL Donors of the account.

Note: You may choose a combination of all three (total must equal 100%). If no option is selected, the succession plan will default to Option (1). Refer to the <u>Program Circular</u> for details. A Donor can change this election at any time by notifying ImpactAssets in writing.

оу і	notifying ImpactAss	ets in writing.						
	1. I would like to na	me ImpactAssets as the beneficia	ry of the ImpactAssets Do	nor Advised Fund account.				
	% of ImpactAssets D	onor Advised Fund Account Value						
		2. I would like to name the following individual(s) as beneficiaries of the ImpactAssets Donor Advised Fund account. Please select one of the following options to determine how the account will be held by the successor(s):						
	Person(s) named below succeeds the account with full rights as Donor(s). Note: Will default to this o selected							
	_	pelow split the remaining, undistributed nt) with full rights as Donor(s).	d assets establishing separate	accounts (\$25,000				
	Successor #1		Successor #2					
	Name (First, Middle	a, Last)	Name (First, Middle, L	ast)				
	Social Security No.	(Last 4 digits)	Social Security No. (Last 4 digits)					
	Email	Home Phone	Email	Home Phone				
	% of ImpactAssets	Donor Advised Fund Account Value	- % of ImpactAssets Do	onor Advised Fund Account Value				
	Advised Fund acco	ame the following Charitable Orga bunt. Consider the below-named o grant recipients upon the death or percentages on a separate page.)	organizations (Must be 501	(c)(3) U.Sbased Public Charities				
	Organization #1	L	Organization #2					
	Organization		Organization					
	Federal Tax ID	Phone	 Federal Tax ID	Phone				

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Mailing Address			Mailing Address				
City	State	Zip/Postal Code	City	State	Zip/Postal Code		
% of Impact Assets	Donor Adviso	d Fund Account Value	% of Impact A	ssats Danar Advisor	d Fund Account Value		

Portfolio Investment Section

There are two ways to select investments through your ImpactAssets Donor Advised Fund account: investment allocations and investment recommendations.

Investment Allocation Options

Select the allocation options that best meet your account goals. You can choose across one or more of these ImpactAssets-managed strategies based on your risk appetite, time horizon and return expectations. These are liquid options that you can use to preserve and/or grow your capital, while also having funds available for direct investing and granting over time. Allocations are designated as a percentage of your available balance. Note: Contributions will be allocated to the Liquid Impact Portfolio if you do not recommend an allocation. Choose your own allocation by entering the % of the total account next to each option.

% Aggressive Growth Impact Portfolio: Diversified investment portfolio of global stocks, bonds and private debt & equity
% Moderate Impact Portfolio: Balanced portfolio of global stocks, bonds and private debt
% Conservative Impact Portfolio: U.S. short-term bonds and globally diversified private debt
Community Investment Strategy: Globally diversified private debt addressing community development themes, targeting conservative growth
 % Liquid Impact Portfolio : High impact portfolio with daily liquidity*
 % TOTAL ALLOCATION (Must be 100%)

Investment Recommendation Options

Separately from the investment allocation percentages above, you are also able to select investments that align with your specific impact areas of interest. You may choose to make investment recommendations in:

IMPACTASSETS THEMATIC IMPACT FUNDS

Multi-asset class, proprietary funds that invest in private funds and companies addressing a specific thematic issue. (Investment minimums apply)

PRIVATE IMPACT OPPORTUNITIES

Fully-vetted selection of third party, professionally managed impact funds that bring an innovative approach to addressing some of the world's greatest challenges.

(Investment minimums apply)

CLIENT RECOMMENDED INVESTMENTS

Donors source and recommend direct investments in private mission-driven businesses, impact funds and nonprofit organizations. (\$25,000 minimum recommendation)

These investment options can be accessed through the online recommendation form. In contrast to the investment allocations which are made in percentages, investment recommendations require you to set a dollar amount. The allocations indicated above will be applied proportionally to 100% of the assets not invested through a recommendation.

^{**}The Liquid Impact Portfolio offers daily liquidity on a best-efforts basis. Redemption requests that exceed 10% of the balance of the overall Liquid Impact Portfolio may be subject to a redemption gate requiring 60 days' notice. The redemption gate may be waived at ImpactAssets' discretion.

Please contact <u>clientservice@impactassets.org</u> for a copy of the Investment Supplement that provides a description of each investment selection listed below, as well as a full list of investment options that will be available once your account is open. If you would like our Client Engagement team to contact you about the Investment Recommendation Options, please include a preferred contact email address and phone number. Preferred Email **Preferred Phone Impact Areas of Interest** The impact areas listed below represent the United Nations (UN) Sustainable Development Goals (SDGs). The UN SDGs are "a universal call to end poverty, protect the planet and improve the lives and prospects of everyone, everywhere." Please mark all that apply. ☐ No Poverty ☐ Affordable & Clean Energy ☐ Climate Action ☐ Decent Work & Economic Growth ☐ Life Below Water □ Zero Hunger ☐ Good Health & Well-being ☐ Industry, Innovation & Infrastructure Life on Land ☐ Quality Education ☐ Reduced Inequality ☐ Peace, Justice & Strong Institutions ☐ Gender Equality Sustainable Cities & Communities Partnerships for the Goals ☐ Clean Water & Sanitation Responsible Consumption & Production Other ___ **Signatures** I acknowledge that I have read the Program Circular and agree to the terms and/or conditions described therein. I understand that any contribution, once accepted by ImpactAssets, represents an irrevocable contribution and is not refundable to me. I hereby certify that, to the best of my knowledge, all information presented in connection with this application is accurate, and I will promptly notify ImpactAssets in writing of any changes. (Please attach any additional donor signatures.) Name (Please Print) Donor 1 Signature Name (Please Print) Donor 2 Signature