

Instructions

Please complete all information in this application form to open a charity fund with The Signatry. Print in ink or type. If you need assistance, you may contact your financial advisor or call 913-310-0279. After the fund is open, please visit our website at thesignatry.com to give to the fund.

Return completed forms to:

Mail or Overnight Delivery:

The Signatry
7171 W. 95th Street, Suite 501
Overland Park, KS 66212

Fax:

913-227-0254

Email:

donorcare@thesignatry.com

Charity Fund Information

A charity fund with The Signatry is used for designating gifts to a single ministry or charity. To learn more about a charity fund, visit thesignatry.com.

Most charity funds are named after the organization (i.e. "The First Baptist Church Charity Fund"). Unless you choose to remain anonymous, the name of your fund will be used in correspondence to the charitable organization that receives grants from the fund.

Fund Name

Charity Information

Charity Name

Tax ID/EIN

Web Address

Mailing Address

Street

City

State

Zip

Phone

Email Address

* Charity must be recognized and qualified as a tax-exempt organization and a public charity or private operating foundation under Sections 501(c)(3) and 509(a) of the Internal Revenue Code, contributions to which are tax deductible under Sections 170(c) and 170(b)(1)(A) of the Code. If the charity ceases to qualify to receive grants under The Signatry User Agreement (available online at thesignatry.com/agreement). The Signatry may distribute assets in the charity fund to another entity at its discretion.

Charity Representative Information

Charity Representative*

Mr. Mrs. Ms.

Full Name _____ Date of Birth _____

Address _____
Street City State Zip

Primary Phone Home Cell Business _____

Email Address _____

Additional Charity Representative*

Mr. Mrs. Ms.

Full Name _____ Date of Birth _____

Address _____
Street City State Zip

Primary Phone Home Cell Business _____

Email Address _____

* Reports will be mailed to the Charity Representative only.

Adding an Additional Advisor (if Applicable)

If you wish for your professional advisor to be able to access your fund, please fill out the information below. (To have a financial advisor also manage your fund's investments, please fill out "Investment Option 2: Investment Manager" below.) If you do not wish to give a professional advisor access, you can leave this section blank.

Additional Advisor: Accountant Attorney Financial Advisor Other _____

Advisor's Name and Title _____

Firm Name _____

Address _____
Street

City _____ State _____ Zip _____

Phone _____

Email Address _____

I authorize my advisor to access my Fund:

- Complete**—full access to managing fund.
 Read/review only—may be informed of fund activity but cannot recommend grants or make changes to the fund.

How Did You First Hear About The Signatry?

- Advisor: _____
- Donor: _____
- Church/Ministry: _____
- Online/Print: _____
- Staff/Board Member: _____

Investment Options

A charity fund with The Signatry can be separately managed by a financial advisor of your choice, or it can be invested in The Signatry’s biblically responsible investment pools (at thesignatry.com/donor-advised-fund/investment-pools/).

Investment Option 1: Investment Pools

If you choose to have the charity fund invested with The Signatry’s biblically responsible investment pools, please indicate below what percentage of your fund you would like invested in each pool:

- _____ % **Money Market**—100% fixed income holdings
- _____ % **Capital Preservation Model**—5% equity holdings
- _____ % **Conservative Income**—25% equity holdings
- _____ % **Income & Growth Model**—50% equity holdings
- _____ % **Growth Model**—70% equity holdings
- _____ % **Aggressive Growth Model**—95% equity holdings
- _____ % **Domestic Index Pool**—95% equity holdings
- _____ % **Global Index Pool**—95% equity holdings
- 100% Total**

For more information on The Signatry’s investment pools, please visit thesignatry.com/investmentpools.

Investment Option 2: Investment Manager

If you would like to have your fund managed by a financial advisor, please recommend in the space below an investment manager for your fund; however, remember that final selection is made by The Signatry. All managers retained by The Signatry must adhere to The Signatry’s investment policies. If you do not recommend a manager, The Signatry will invest your fund in their biblically responsible investment pools.

Company _____

Advisor Name _____

Address _____

Street

City _____ State _____ Zip _____

Phone _____ Fax _____

Email Address _____

Acknowledgment

By signing below: (1) I, the undersigned donor, understand that all gifts to this fund are irrevocable and nonrefundable gifts to The Signatry for charitable purposes; (2) I acknowledge that I have read and agree to this Application and The Signatry User Agreement (which includes details regarding the terms used in this Application, the parties’ roles and responsibilities, limitations of liability, an arbitration clause (including a class action waiver), indemnification of The Signatry, and other terms and conditions) which are available on The Signatry’s website (at thesignatry.com/agreement) or upon request; (3) I certify that, to the best of my knowledge, all information I have provided is accurate and I will notify The Signatry promptly of any changes; and (4) I also understand that my capacity as a Donor is advisory in nature and that The Signatry has the sole and exclusive authority and discretion to invest and disburse the property transferred.

Authorized Signer for Charity _____

Printed Name of Signer for Charity _____ Date _____

Authorized Signer for Charity _____

Printed Name of Signer for Charity _____ Date _____