



APPLICATION CHECKLIST

Please include the following attachments with your completed application.

- Check made payable to Reinvestment Fund Inc.
Completed W-9.
Investor or authorized signers include a copy of driver's license or other government issued ID to validate identity.
If establishing an investment in the name of a trust, please enclose a copy of the trust document or trust certification form. If establishing an investment in the name of a corporation or other entity, please include a copy of the investment resolution and articles of incorporation.

TYPE OF INVESTMENT

Ownership of the promissory notes will be recorded exactly as stated (check only one box).

An investor must be of legal age for the state in which s/he resides in order to be listed as an Owner of an account.

Accredited investor? (total assets in excess of \$5 million) Yes No

- Individual
Joint
Trust

Corporation or Entity

Type of Organization:

- Government: Local State Federal
For-profit: Corporation Bank Other financial
Nonprofit: Foundation Religious Civic

OWNERSHIP INFORMATION

Individual, Trust or Entity

Name (If individual: first, middle initial, last)

Birthdate (mm/dd/yyyy)

Joint Owner, Trustee, Wealth Manager, or Other

Name (first, middle initial, last)

Birthdate (mm/dd/yyyy)

Title / Relationship

Each investor is a U.S. Citizen or a U.S. resident alien? Yes No

Is any investor a foreign political figure? Yes No

Uniform Gifts/Transfers to Minors Act Investment

Name (If individual: first, middle initial, last)

Birth date (mm/dd/yyyy)

This investment is being made under the (name of state) Uniform Gifts/Transfers to Minors Act. *UGMA/UTMA accounts will be registered in the minor's Social Security number.

ADDRESS

This information will be used as the address of record for correspondence

Address

City State Zip

Phone (XXX-XXX-XXXX)

Email

COMMUNICATION OPTIONS

Indicate whether or not we may list you among our financial supporters.

- Yes, please list my/our name(s).
No, please do not list my/our name(s).

I would like to receive all communications related to my investment:

- by mail. electronically.

INVESTMENT INFORMATION

The minimum investment is \$1,000 and minimum term is 3 years. Maturity dates will be June 30 or December 31 depending on the initial investment date. Investors have the option to reinvest interest payments with Reinvestment Fund. **Interest will be reinvested into principal, on those dates that interest payments are otherwise made**, i.e. June 30 or December 31, as determined by the maturity date of the investment.

\$ _____
Principal Amount

_____ Term (in years)

_____ Interest: **Reinvest Interest**
 Pay Interest Annually

Interest Rate (up to maximum on Prospectus)

PhilImpact Fund

I would like to restrict my funds to lending in the **Greater Philadelphia** region.

Bequest

Investors may choose to donate the principal of their loan, along with all accrued and unpaid interest, to Reinvestment Fund in the event of their death(s) prior to the maturity date of the loan. Funds will be retained as equity in the Loan Fund to be used for the same purposes as the initial investment. In the case of Joint Investors, the donation will be deemed to be made at the death of the last survivor of the Investors. Because this may impact an Investor's estate and tax plan, we suggest that Investors who make this election discuss this with their estate and tax planning advisors. The Promissory Note will set forth the terms and conditions of the donation.

I wish to donate the then outstanding principal amount of my loan, along with all accrued and unpaid interest, to Reinvestment Fund as a contribution to equity in the Loan Fund in the event of my death before the maturity date.

SIGNATURES

I certify that to the best of my knowledge the information provided above is correct. I have also received and read the Prospectus for the Fund in which I am investing and I agree to the terms of the Prospectus.

Owner, Custodian, Trustee, Corporate Officer, etc.

Joint Owner, Co-Trustee, Corporate Officer, etc.

Date: _____

Date: _____

Please include check made payable to Reinvestment Fund.

How did you hear about Reinvestment Fund? _____

Your investment allows Reinvestment Fund to finance homes, schools and businesses that build strong, healthy, and more equitable communities. **Thank you for investing.**

