

Drexel University Donor Contribution Request Agreement



Instructions

Please return this completed, signed agreement to David Toll at dtoll@drexel.edu. If you have any questions or need assistance, please call us at (215) 895-4982. Before completing this document, please:

1. Read the Drexel University Donor Circular and Disclosure Statement (“Donor Circular”). The Donor Circular includes important information on your *irrevocable, nonrefundable* contribution and features of the program.
2. Consult your tax and/or legal advisor before contributing.

Please note:

- You will receive a charitable income tax deduction receipt. A deduction will not be available to you until transferred assets have been received by Drexel University.
- **The minimum initial contribution is \$25,000. Each individual asset must have an estimated fair market value of at least \$5,000.**
- Market conditions may affect your actual contributed amount.

Contribution Request

I am making a donation to Drexel University ("Drexel"), of the property described in Section F (Gift Information). I request, but do not require, that Drexel use this donation to make a grant to the donor advised fund at Morgan Stanley Global Impact Funding Trust, Inc. (“Morgan Stanley GIFT”) described below.

A. Donor Information

- New Account Make Change to Existing Account (REQUIRED SECTION)

1. Individual Donor or Joint Donors

Primary Donor (receives account statement)

_____	_____	_____	<input type="checkbox"/> MR.	<input type="checkbox"/> MRS.	<input type="checkbox"/> MS.
FIRST NAME	MIDDLE INITIAL	LAST NAME			
_____	_____	_____	_____	_____	_____
STREET ADDRESS	CITY	STATE	ZIP CODE		
_____	_____	_____	_____	_____	_____
HOME TELEPHONE	BUSINESS TELEPHONE	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)		

EMAIL ADDRESS					

Instructions to register for online to your account will be sent via email.

Secondary Donor

_____	_____	_____	<input type="checkbox"/> MR.	<input type="checkbox"/> MRS.	<input type="checkbox"/> MS.
FIRST NAME	MIDDLE INITIAL	LAST NAME			
_____	_____	_____	_____	_____	_____
STREET ADDRESS	CITY	STATE	ZIP CODE		
_____	_____	_____	_____	_____	_____
HOME TELEPHONE	BUSINESS TELEPHONE	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)		

EMAIL ADDRESS					

2. Trust, Corporation or Other Entity

TAXPAYER ID NUMBER

TRUST/INCORPORATION DATE

TRUST NAME

FULL LEGAL NAME OF CORPORATION/BUSINESS ENTITY

STREET ADDRESS

CITY

STATE

ZIP CODE

BUSINESS TELEPHONE

TRUSTEE/AUTHORIZED SIGNOR NAME, POSITION AT FIRM

EMAIL ADDRESS

Kpuit wekqpu'vq't gi kwgt 'lqt 'qprkpg'vq'f qwt 'ceeqwpy' kw'dg'ugpv'xkc'go chl0

B. Personalize Your Account (required section)

You may name your account after your family or any other name that you choose. When each grant is approved, the donor may elect to have the accompanying letter to the donor's recommended charity contain the donor's account name. The donor's account name may not exceed 45 characters.

ACCOUNT NAME

C. Name Advisor(s)

Donors are advisors by default, so they do not need to name themselves as advisors in this section. You may name individuals who will have the authority to decide which charitable organizations(s) to make grants to and to enter grant recommendations for your donor account. Advisors may **not** name additional advisors and will **not** succeed the donors unless they are also named in Section D as successor donors. If you do not wish to name an advisor, please skip to Section D.

Advisor 1

FIRST NAME

MIDDLE INITIAL

LAST NAME

MR.

MRS.

MS.

SOCIAL SECURITY NUMBER

DATE OF BIRTH (MM/DD/YYYY)

STREET ADDRESS

CITY

STATE

ZIP CODE

HOME TELEPHONE

BUSINESS TELEPHONE

EMAIL ADDRESS

Advisor 2

FIRST NAME

MIDDLE INITIAL

LAST NAME

MR.

MRS.

MS.

SOCIAL SECURITY NUMBER

DATE OF BIRTH (MM/DD/YYYY)

STREET ADDRESS

CITY

STATE

ZIP CODE

HOME TELEPHONE

BUSINESS TELEPHONE

EMAIL ADDRESS

D. Name Successor(s) to Donor(s)

You may name individual successors to succeed you in advising on grantmaking for your account after the death or non-responsive five-year inactivity of all the original donors. If you prefer to have Drexel receive any remaining assets in your account after the death or non-responsive five-year inactivity of all the original donors, please leave this Section blank.

Special Instructions: Upon the death or incapacity of the original donor(s), please select one of the following options: **(Required if more than one successor)**

- 1 Successors 1 and 2 will succeed the account and share equal responsibility over the account and may act jointly or separately.
2 Successors 1 and 2 will split the account into two (2) separate and equal accounts.

Successor 1

_____	_____	_____	<input type="checkbox"/> MR.	<input type="checkbox"/> MRS.	<input type="checkbox"/> MS.
FIRST NAME	MIDDLE INITIAL	LAST NAME			
_____	_____	_____	_____	_____	_____
SOCIAL SECURITY NUMBER		DATE OF BIRTH (MM/DD/YYYY)			
_____	_____	_____	_____	_____	_____
STREET ADDRESS	CITY	STATE		ZIP CODE	
_____	_____	_____	_____	_____	_____
HOME TELEPHONE		BUSINESS TELEPHONE			
_____		_____			
EMAIL ADDRESS					

Successor 2

_____	_____	_____	<input type="checkbox"/> MR.	<input type="checkbox"/> MRS.	<input type="checkbox"/> MS.
FIRST NAME	MIDDLE INITIAL	LAST NAME			
_____	_____	_____	_____	_____	_____
SOCIAL SECURITY NUMBER		DATE OF BIRTH (MM/DD/YYYY)			
_____	_____	_____	_____	_____	_____
STREET ADDRESS	CITY	STATE		ZIP CODE	
_____	_____	_____	_____	_____	_____
HOME TELEPHONE		BUSINESS TELEPHONE			
_____		_____			
EMAIL ADDRESS					

E. Recommend an Asset Allocation (required section)

Please recommend an asset allocation for your donor account. More complete information on the allocation pools may be found in the Donor circular. Please note that the percentage(s) inserted below must add up to 100%.

Consulting Group

- | | |
|---|---|
| 1. ____% Aggressive Investment Pool (100% Equities) | 6. ____% Investing with Impact Balanced Pool—(50% Equities, 50% Bonds) |
| 2. ____% Growth Investment Pool (35% Bonds, 65% Equities) | 7. ____% ETF Equities Pool—(100% Equities) |
| 3. ____% Balanced Investment Pool (50% Equities, 50% Bonds) | 8. ____% ETF Fixed Income Pool—(100% Bonds) |
| 4. ____% Conservative Investment Pool (75% Bonds, 25% Equities) | 9. ____% Money Market Fund—(MS Active Assets Institutional Gov't. Money Market) |
| 5. ____% Investing with Impact Aggressive Pool (100% Equities) | |

If you do not recommend an asset allocation, Morgan Stanley GIFT, Inc. will invest your contribution as follows: 100% Balanced Pool (50% Equities, 50% Bonds).

F. Gift Information (required section)

The minimum initial contribution is \$25,000. Each individual asset must have an estimated fair market value of at least \$5,000. **Please review the Donor Circular for information on assets that Drexel and Morgan Stanley GIFT may accept. Market conditions may affect your actual contributed amount.**

1. Cash

\$ _____
DOLLAR AMOUNT

_____ NAME OF FINANCIAL INSTITUTION WHERE CASH IS HELD

2. Securities

Name of Security 1

_____ CUSIP (REQUIRED) _____ INTERNAL TICKER (REQUIRED) _____ EXTERNAL TICKER (REQUIRED)

_____ NUMBER OF SHARES/BONDS/MUTUAL FUNDS _____ ACCOUNT NUMBER _____ APPROXIMATE VALUE

_____ FINANCIAL SERVICES COMPANY NAME

Name of Security 2

_____ CUSIP (REQUIRED) _____ INTERNAL TICKER (REQUIRED) _____ EXTERNAL TICKER (REQUIRED)

_____ NUMBER OF SHARES/BONDS/MUTUAL FUNDS _____ ACCOUNT NUMBER _____ APPROXIMATE VALUE

_____ FINANCIAL SERVICES COMPANY NAME

Market conditions may affect your actual contributed amount.

You may contribute additional cash and/or publicly traded securities to Drexel and request grants to the donor advised fund at any time by completing an Additional Contribution Agreement. The value of additional contributions must be a minimum of \$5,000 and each individual asset contributed must have an estimated fair market value of at least \$5,000. Donations of assets other than cash and/or publicly traded securities will require the advance approval of Drexel and Morgan Stanley GIFT. Market conditions may affect your actual contributed amount.

3. Donation from Another Charitable Vehicle

Please complete this section if you are interested in making an IMMEDIATE transfer. Consult Drexel if you wish to make a FUTURE contribution from a charitable vehicle.

_____ NAME OF CHARITABLE VEHICLE

_____ DESCRIPTION

_____ DOLLAR AMOUNT

G. Administration of the Account

The assets of my account will be distributed for charitable purposes, and shall be administered pursuant to the Donor Circular and the governing instruments of Drexel and Morgan Stanley GIFT as they may be amended from time to time.

I understand that no grants may be made to private foundations, to satisfy a pre-existing pledge, for any private benefit or to support any political campaign activities. I also understand that the Board of Directors of Morgan Stanley GIFT remains the final authority to determine the amount and recipient of any grant and that grant recommendations do not have to be followed.

I understand that if no grant recommendations are made for a period of five years, the Board of Directors may terminate any further right to make recommendations on the part of the donor(s). In such event, it would be my recommendation that grants be made to Drexel.

I understand that Morgan Stanley GIFT will charge administration fees against the account and pay investment management, advisory, and administrative fees in accordance with its standard procedures.

H. Acknowledgement of Terms

Drexel is an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended. Drexel receives contributions from various donors which become subject to the control of Drexel. Drexel, in its discretion, may contribute property from time to time to Morgan Stanley GIFT for the purposes of establishing "white label" donor-advised funds in the name of Drexel's own donors. Morgan Stanley GIFT is an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, and a donor-advised fund. Various divisions of Morgan Stanley Smith Barney, LLC provide investment management and administrative services to Morgan Stanley GIFT. All contributions to Drexel are irrevocable and non-refundable. Contributions and all related future earnings, including any income and appreciation thereon, are no longer the donor's assets; they are the property of Drexel. While we believe that a white label donor-advised fund provides a valuable philanthropic opportunity, contributions for such funds are not appropriate for everyone. Please see the Donor Circular for more complete information on the Drexel white label donor-advised fund, including a description of risks, fees and expenses.

By signing this form, I request that Drexel use my donation to make a contribution to a donor account established by Morgan Stanley GIFT with terms like those described in this agreement. **I have received the Donor Circular and I understand that I am responsible for reading it. I agree that my donor account shall be legally bound by the Donor Circular's terms and conditions, as currently in effect and as amended from time to time, and the terms and conditions set forth in all related forms.**

I understand that any contributions I make to Drexel are irrevocable and nonrefundable to me for any reason. I realize that any dividend, interest and capital gains generated from my donations belong to Drexel. Therefore, I cannot and will not claim that income as additional tax deductions. Once my contributions have been accepted, they are the property of Drexel governed by an independent Board of Directors. I understand that Drexel is under no obligation to make grants to a donor-advised fund maintained by Morgan Stanley GIFT or any other sponsoring organization. I understand that Morgan Stanley GIFT investments could sustain a loss which would lead to there being less money to grant than Morgan Stanley GIFT originally received from Drexel. **I am aware that any recommendations that I suggest will be considered but are subject to approval by the Board of Directors of Morgan Stanley GIFT concerning the investment selections, grants and award to any charitable organization.**

I understand that the Consulting Group Select UMA and Money Market Account pools may lose money.

I understand that market conditions may affect the actual contributed amount.

To the best of my knowledge, all information enclosed is accurate and I will immediately notify Morgan Stanley GIFT if any changes occur. My signature below constitutes my agreement and acceptance of all terms, conditions and features selected in all parts of this application, and in all additional forms. SIGNATURES ARE REQUIRED FROM ALL DONORS LISTED ON THE ACCOUNT.

DONOR SIGNATURE

DATE

DONOR SIGNATURE

DATE