

LETTER OF TRANSMITTAL REVOCABLE INVESTMENT ACCOUNT

| United Methodist Frontier Foundation Attention: Ellen Knudsen, Executive Director 20 Soundview Avenue White Plains, NY 10606 | Date | | | | |
|---|---------------------------------------|--|--|--|--|
| In recognition of the United Methodist Frontier Foundation, Inc. as an arm of the Church and its | | | | | |
| stewardship, we enclose our check in the amount of \$ | , dated, | | | | |
| and made payable to the United Methodist Frontier Foundati | ion, Inc. This represents funds which | | | | |

we are placing with the Foundation in an account to be known as the:

_____ Fund,

to be invested as follows:

- <u>2</u> % Money Market Fund (This is a mandatory allocation of your investment)
- _____ % Balanced Income Fund (ratio of 70% Fixed income/30% Equities)
- ______% Growth And Income Fund (ratio of 50% Fixed income/50% Equities)
- Bond Fund
- _____ % Diversified Equity Fund
- 100 % Total Fund Allocations (must equal 100%)

By this **LETTER OF TRANSMITTAL** we direct that, until we notify you otherwise, the Foundation is to (choose one):

- (2) Reinvest income _____
- (3) Each year, pay us _____ % of the **3-or 5-year average (Please circle one)** balance of the account in

Quarterly _____ semi-annual _____ annual installments.

(This total return approach may be appropriate for endowments and other permanent funds, especially if they have grown substantially since their inception.)

We understand:

- that reports on this fund will be made available monthly on the Foundation website (www.UMFF.org) or mailed quarterly within thirty (30) days following the close of the applicable period.
- income checks pertaining to each account will be mailed to investors within thirty (30) days following the close of the applicable period.
- that we can make additions to this account at any time, and that monies received in the Foundation Office will be deposited immediately in a Money Market account and invested as indicated in this document the next time the fund shares are valued (normally monthly).
- that any income to be reinvested will be added to the principal on a monthly basis. We understand that any realized capital gains/losses will be added to/subtracted from the principal on a monthly basis also.
- that we must notify the Foundation in writing at least ten (10) days before the beginning of the next quarter should we decide to alter our stated plan for receiving or investing dividends, and such change will take effect at the beginning of the next quarter.
- that upon notification in writing to the Foundation, any part or all of this account may be withdrawn and will be paid within sixty (60) days of receipt of notification.
- that the Foundation's annual fees for services provided are based on the Fee Schedule which follows as Schedule "A". The Foundation reserves the right to revise the Annual Fee Schedule upon thirty (30) days advance written notice. The Foundation will not revise the Fee Schedule more than once per calendar year. The Foundation's fees, based on the then current Fee Schedule, are computed and charged monthly.

Signed:

| (a) | For the | | | | |
|-------------------------|------------------------|--|--|--|--|
| | (Name of Organization) | | | | |
| | Address | | | | |
| | | | | | |
| | | | | | |
| | F 1 _ 1 _ 1 | | | | |
| | | ess (if you wish to receive reports online) | | | |
| | (Th | is address is for notification purposes only; reports are NOT sent here) | | | |
| Signature:Name: (print) | | Name: (print): | | | |
| | | ative Council/Trustees/Finance Comm) | | | |
| | | _ | | | |
| Title: | | Date: | | | |
| Past | or or Chief F | xecutive Officer | | | |
| | | | | | |
| Sign | lature: | Name:(print): | | | |
| | | | | | |
| Title | e: | Date: | | | |
| | (Pastor or C | hief Executive Officer) | | | |
| (b) | For the U | nited Methodist Frontier Foundation: | | | |
| Sign | nature: | Name:(print): | | | |
| U | (E | xecutive Director/President) | | | |
| Date | e: | | | | |
| | | | | | |

Please remit signed copy to the Foundation. A copy of the original, signed by the UMFF Executive Director will be returned to the church.



Schedule A Asset Management Fee Schedule Effective Date – February 1, 2019

Management fees are deducted monthly based on the account balance. If there is more than one account, the total of the partner's accounts is used to calculate fees. Divide the aggregate rate by 12 months for the monthly fee amount. See examples below:

| | Annual |
|--|----------|
| | Fee Rate |
| Account values < \$250,000 | 1.25% |
| Account values > \$250,000 < \$1,000,000 | 1.00% |
| Account values > \$1,000,000 < \$3,500,000 | 0.80% |
| Account values > \$3,500,000 | 0.60% |

Investment Management Fee Examples

Account values < \$250,000

| | Account Balance | Fee Rate | Annual Fee |
|--|-----------------|----------|------------|
| | \$30,000 | 1.25% | \$375 |
| | \$100,000 | 1.25% | \$1,250 |
| | \$250,000 | 1.25% | \$3,125 |
| Account values > \$250,000 < \$1,000,000 | | | |
| Example: Total Portfolio: | \$350,000 | | |
| | | Fee Rate | Annual Fee |
| First: | \$250,000 | 1.25% | \$3,125 |
| | \$100,000 | 1.00% | \$1,000 |
| | Aggregate Rate: | 1.179% | \$4,125 |
| Account values > \$3,500,000 | | | |
| Example: Total Portfolio: | \$7,000,000 | | |
| | | Fee Rate | Annual Fee |
| First: | \$250,000 | 1.25% | \$3,125 |
| | \$750,000 | 1.00% | \$7,500 |
| | \$2,500,000 | 0.80% | \$20,000 |
| | \$3,500,000 | 0.60% | \$21,000 |
| | Aggregate Rate: | 0.74% | \$51,625 |
| | | | |