

Please complete all information in this application form. Print in ink or type. The minimum initial contribution is \$1,000,000 and the minimum additional contribution is \$1,000. If you need assistance, you may contact us at 617-421-1750

Return completed forms to:

Windrose Advisors Giving Fund
 800 South Street, Suite 600
 Waltham, MA 02453

Fax: 877-222-1829

Email: Windrose@reninc.com

DONOR-ADVISED FUND INFORMATION

Your fund can be named after you or your family, or it can reflect an area of interest to you (e.g. John Donor Family Fund, or the Donor Fund for the Arts). Unless you choose to remain anonymous, the name of your fund will be used in correspondence to the charitable organizations that receive grants from the fund.

Fund name

Recommended Primary Charitable Purpose

DONOR INFORMATION

DONOR OF RECORD*

Mr. Mrs. Ms.

Full name	<input type="text"/>		
Social Security number	<input type="text"/>	Date of birth	<input type="text"/>
Street address	<input type="text"/>		
City/State/Zip	<input type="text"/>		<input type="text"/>
Home phone	<input type="text"/>	Business phone	<input type="text"/>
Email address	<input type="text"/>		

ADDITIONAL DONOR*

Mr. Mrs. Ms.

Full name	<input type="text"/>		
Social Security number	<input type="text"/>	Date of birth	<input type="text"/>
Street address	<input type="text"/>		
City/State/Zip	<input type="text"/>		<input type="text"/>
Home phone	<input type="text"/>	Business phone	<input type="text"/>
Email address	<input type="text"/>		

* Reports will be mailed to the Donor of Record only.

■ CONTRIBUTIONS

You may wire or send securities, directly to your new account at Windrose Advisors. ***your financial advisor must initiate all transfers to Windrose Advisors.***

CASH*

\$	Cash
\$	Wire Transfer (please request wire transfer instructions from your financial advisor)

You may wire cash or checks, as well as send securities, directly to your account at Windrose Advisors using the information below:

MARKETABLE SECURITIES*

Name of security issuer				
Where security certificate is held				
Ticker/CUSIP		Account #		# of shares
Name of security issuer				
Where security certificate is held				
Ticker/CUSIP		Account #		# of shares
Name of security issuer				
Where security certificate is held				
Ticker/CUSIP		Account #		# of shares

(Please attach additional marketable securities information in the same format, if needed)

OTHER ASSETS*

If you wish to contribute an asset other than cash or publicly traded securities, please call the Foundation to discuss the review process.

■ INVESTMENT MANAGER

You may recommend an investment manager for your fund.

Name			
Street address			
City/State/Zip			
Phone Number		Fax Number	
Email address			

■ SUCCESSOR GRANT ADVISOR INFORMATION

The donor of record's successor has the right to make grant recommendations. Donors have two (2) alternative successor options:

- To name an individual to succeed the donor as the Fund's Grant Advisor; or
- To recommend that, upon the death of the fund's last surviving Grant Advisor (including all named successors), the fund supports one (1) or more charitable organizations described in Section 501 (c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), and that are not private foundations within the meaning of Code Section 509(a). (Please list additional charitable organizations and the percent they are to receive.)

Successors may be appointed or changed at any time by submitting an Account Information Change Form.

As Donor of Record, I hereby name the following person as my successor:

Full name or name of charity			
Street address			
City/State/Zip			
Home phone			
Email address			
Tax ID or SSN			

■ ALLOCATION OPTIONS

Choose any of the investment options below.

Your allocation must equal 100%

Contact your Windrose Advisors Financial Advisor for information about these options.

Pooled Investment Account

Or

Individually Managed Account

This option will need to be approved by Windrose Advisors before we can open the account

■ ACKNOWLEDGMENT

The undersigned donor, (hereafter referred to in the first person singular), makes an irrevocable and nonrefundable gift for charitable purposes to Windrose Advisors administered by Renaissance Charitable Foundation Inc. (the "Foundation"). By signing below, I hereby acknowledge that I have read this Application and the Foundation's program circular, and I agree to the terms and conditions set forth in this Application and the Circular. I certify that, to the best of my knowledge, all information presented in connection with this Application is accurate and agree to notify the Foundation promptly of any changes. I also understand that my capacity as a Grant Advisor is advisory in nature and that the Foundation has the sole and exclusive authority and discretion to invest and disburse the property hereby transferred.

Signature		Date	
Printed Name of Donor			
Signature		Date	
Printed Name of Donor			

If married, both donors should sign

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or visit our web site at:

<https://Windroseadvisor.donorfirstx.com>