

Friends of UBS Optimus Foundation Fund

Donor Form

City, State, Zip

Complete this form to make a contribution to the Friends of UBS Optimus Foundation Fund (the "Fund"), a foundation advised fund administered by National Philanthropic Trust (NPT). If you need assistance completing this form, please contact your UBS Financial Advisor.

dei	nor Information Intify all registered owners of the account from which assets are being donated. Note: The NPT gift substantiatio Intify all registered owners of the account from which assets are being donated. Note: The NPT gift substantiatio Interior which is provided for federal tax reporting purposes, will be sent to the Donor(s) listed below.
	Donor(s)
	Name (First, middle initial, last)
	Address
	City, State, Zip
	Joint Donor(s)
	Name (First, middle initial, last)
	Address
	City, State, Zip
	Organizational Donor(s) If you are making a contribution from your donor-advised fund (DAF), please contact your DAF provider about how to make the donation from your DAF account. Please note that any contributions from a DAF will not receive a gift substantiation letter.
	Name of entity
	Type of entity (Foundation, Corporation, Trust, Donor-Advised Fund)
	Address

to the Fund account Please transfer the cash and/or securities from my UBS account number JGA6585 as directed below. Please send the gift substantiation letter to the following email address: Cash Dollar amount \$ _____ Stock Name of Stock Trading symbol # of shares Name of Stock Trading symbol # of shares Trading symbol Name of Stock # of shares Name of Mutual Fund Trading symbol # of shares Name of Mutual Fund Trading symbol # of shares Name of Mutual Fund Trading symbol # of shares Bonds Name of Bond Quantity or face amount **CUSIP** Name of Bond Quantity or face amount **CUSIP** Name of Bond **CUSIP** Quantity or face amount 3. Donation suggestion ☐ I would like my donation to be applied where help is most needed, for the general charitable purposes of the UBS Optimus Foundation. ☐ I would like my donation to support one or more of the following charitable purposes of the **UBS** Optimus Foundation: Child protection Environment Emergency Health Education rapid response ☐ I would like my donation to support the following specific project of the UBS Optimus Foundation: Project Description: _____

2. Gift information

4.	Details concerning future contact:			
	By signing below, I agree to each of the following:			
	☐ I would like to receive future information about the activities of the UBS Optimus Foundation: ☐ Yes ☐ No			
	☐ Please send information to me by e-mail at the following address:			
	☐ Information will be sent to my Financial Advisor to pass on to me.			
5.	Acknowledgement of terms (Each Joint Donor named in Section 1 must sign below; Acceptable forms of signatures are via DocuSign or wet signature. If DocuSign is preferred, please contact your Advisor)			
	 By signing below, I agree to each of the following: i. I understand that my gift described in Sections 2 and 3 is an irrevocable and unconditional contribution when received and accepted by National Philanthropic Trust (NPT), NPT retains exclusive legal control over the contributed assets, and my gift will be used to support a granting program through the Fund. ii. I acknowledge that as the Fund's Advisor, UBS Optimus Foundation has sole discretion to make grant recommendations, and will consider the Donor's donation suggestion in recommending grants to NPT, with NP having full investment and grantmaking discretion over the assets. I agree that once donated, I will not have the ability to direct or recommend how my donation will be applied. iii. I understand that UBS Optimus Foundation supports the projects of external organizations with the donations is receives, but does not conduct any projects on its own. With respect to any donation suggestion in support of specific project, I declare that neither I nor any persons related or connected to me will obtain a direct or indirect financial advantage as a result of my donation. iv. I confirm that UBS did not provide tax or legal advice regarding this donation. v. I certify that, to the best of my knowledge, all information provided is accurate. 			
	Donor signature/Authorized individual	Date		
		 Date		
6.	Return this completed form to your Financial Advisor			
UE	BS Financial Services Inc. Branch use only			
	complete Donor contribution: an and e-mail to: sh-friendsofoptimus@ubs.com			
	here Donor has elected to receive future information from his or her Finar mail to:	ncial Advisor, information should be sent via		
	@ubs.com			