Investment Application For LCMS Organizations

This limited-time offer is available for Lutheran Church–Missouri Synod:

⊗ INDIVIDUALS ⊗ CONGREGATIONS ⊗ ORGANIZATIONS

STEP 1: Officer Authorization

|--|

| We, | , and |
|--|---|
| Organization Officer Name | Organization Officer Title |
| Organization Officer Name | Organization Officer Title |
| | hereby certify tha |
| Organization Name, City and State | nereby certify that |
| A. The Organization is duly organized and existing under certification on its behalf. | the laws of the state of its domicile and that as such has authorized me to make th |
| Each of the signers listed in STEP 4-Authorized Signers having investment and redemption privileges. | s has been duly authorized and empowered to act on behalf of the Organization by |
| ■ Signature Authorization Check one: If unmarked, it will be assumed that only of | one signature is required. |
| Any one of the signatures in STEP 4 is required as | authorization in all transactions. |
| Any two of the signatures in STEP 4 are required a | as authorization in all transactions. |
| investment and loan accounts. | at users must complete STEP 7 to request online access to the Organization's |
| investment and loan accounts. Authorized signers will have the ability to see investion and e-statements. C. I understand that the Organization must complete a note and empowered personnel in the event that: (i) any organization. | the users must complete STEP 7 to request online access to the Organization's ment and loan balances, make transactions (if applicable) and view history ew <i>Investment Signature Authorization Form</i> containing all authorized if the persons listed in STEP 4–Authorized Signers are no longer authorized by erson is to be duly authorized and empowered by the Organization. |
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| | R LCEF USE ONLY: | | | | 425 | |
|---|--------------------|--|---|-----------------|------------------------|--|
| PR | OC | Dt | Ver | Ver | | |
| STEP 3: Inves | tment Registration | If you are tax-exempt, | check here. | | | |
| • | ation: | E | mployer Identification Nun | nber: | | |
| If applicable, spec | cify title: | E | nail address: | | | |
| Street Address of | Organization: | | | | | |
| City, State, ZIP: | | | | | | |
| Mailing Address for | or Organization: | | | | | |
| City, State, ZIP: | | | | | | |
| Telephone: | | | _ Fax: | | | |
| Name (please print) | | e certification statements list Title | Name (please print) | · | itle | |
| Street Address | | | Street Address | | | |
| City, State, ZIP | | | City, State, ZIP | | | |
| | per Date of Bi | | Social Security Number | | | |
| Home Phone | Work Phone | Mother's Maiden Name | Home Phone Signature X | Work Phone | Mother's Maiden Nan | |
| Add to <i>MyAccount</i> (current users only)New <i>MyAccount</i> user (complete STEP 7) | | Signature X | Add to <i>MyAccount</i> (current users only) New <i>MyAccount</i> user (complete STEP 7) | | | |
| Name (please print) | | Title | | Title | | |
| Street Address | | | Street Address | | | |
| City, State, ZIP | | | City, State, ZIP | | | |
| Social Security Numb | per Date of Bir | th Email | Social Security Number | Date of Birth | Email | |
| Home Phone | Work Phone | Mother's Maiden Name | Home Phone | Work Phone | Mother's Maiden Nan | |
| ignature X | Add to <i>MvA</i> | ccount (current users only) | Signature X | Add to MyAccoun | t (current users only) | |
| | • | ount user (complete STEP 7) | | • | ser (complete STEP 7) | |

STEP 5: Interest Payment and Electronic Investment

Interest Payment Options

| Please check one method of interest payment: |
|--|
| Let interest accumulate in this investment. |
| Transfer interest to my existing LCEF investment or StewardAccount # |
| Transfer interest to my/our external financial institution. |
| Routing number Account number |
| Send the interest monthly Send the interest quarterly |
| |

STEP 6: Investment Certification

"I" and "my" refers to all applicants, whether one or more.

By signing this application in STEP 4, I certify that:

General Provisions

- I am an authorized signer for the Organization specified in STEP 3, and I have received a current Offering Circular of The Lutheran Church Extension Fund-Missouri Synod.
- At the time of the receipt of the Offering Circular, the Organization was affiliated with The Lutheran Church—Missouri Synod or any district or other program, activity, or organization that constitutes a part of the Synod or any of its districts, or an organization whose purposes include serving members of the Lutheran faith or to carry out the purposes of The Lutheran Church—Missouri Synod. Unless otherwise prohibited by a state, by signing this application, I consent and "opt-in" to automatic renewals of my investments as more particularly described in the Maturities section of the Offering Circular. For Pennsylvania organizations only: By signing this application, I acknowledge that I was advised of the right of withdrawal described in the Offering Circular.
- All information provided on this application is true and correct.
- The Organization authorizes LCEF to initiate any correcting debit or credit that may be necessary.
- I acknowledge and agree to the Fee Schedule available at Icef.org/resources.

Interest Payment/Electronic Investment Provisions:

■ The Interest Payment and Electronic Investment options selected on this application will remain in effect until revoked in writing. I acknowledge that the origination of automated clearinghouse (ACH) transaction to the Organization's investment must comply with the provisions of U.S. law.

MyAccount Provisions:

- The Organization authorizes LCEF to accept all transaction requests initiated on the Organization's behalf through the MyAccount service.
- The Organization must notify LCEF immediately if any of the signers are no longer authorized to act on its behalf.

Under penalties of perjury, I certify:

- 1. The Employer Identification Number in STEP 3 and the Social Security numbers of all individuals provided in STEP 4 are correct.
- 2. The Organization is not subject to backup withholding because (a) it is exempt from backup withholding, (b) it has not been notified by the Internal Revenue Service (IRS) that it is subject to backup withholding as a result of a failure to report all interest or, (c) it has been notified by the IRS that it is no longer subject to backup withholding.
- 3. The Organization is a U.S. entity.

STEP 7: MyAccount—Online Access

MyAccount is a service offered by LCEF, providing online access to your Organization's investment and loan accounts. Upon setup, the *MyAccount* applicant will receive an email confirmation with their user name and temporary password.

User Name Selection [Please print]

- Review STEP 4 to ensure you have provided the personal information requested. This information is required to process your MyAccount enrollment.
- When selecting a user name, the name must contain at least six characters with a maximum of 20 characters.
- *MyAccount* access to investments requiring two signatures will be limited to inquiry only.

| 1. Applicant Name: | | | | | | |
|--------------------|-----------------|---------------|------------|--------------|--|--|
| User Name: | User Name: | Second Chaica | User Name: | Third Chaica | | |
| X New Account(s) | Other Accounts: | | | | | |
| | | | | | | |
| User Name: | User Name: | | User Name: | | | |
| | Other Accounts: | | | | | |
| | | | | | | |
| User Name: | User Name: | | User Name: | | | |
| X New Account(s) | Other Accounts: | | | | | |
| | | | | | | |
| User Name: | User Name: | | User Name: | | | |
| | Other Accounts: | | | | | |
| | | | | | | |

