

Letter of Instruction

The Letter of Instruction (LOI) is required if you are transferring securities or mutual funds. This LOI is not required if you are transferring cash or physical stock certificates.

Instructions

- Send the **Original LOI** with Medallion Signature Guarantee, if required, to the firm currently holding the securities.
- Send a **Copy of the LOI** with Application or Contribution Form to:
 - By Email: operations@impactassets.org
 - By Fax: 301.263.7998
 - By mail: ImpactAssets
c/o Calvert Foundation
7315 Wisconsin Avenue, Suite 1000W
Bethesda, MD 20814
Telephone: 855.482.2946

Note:

- The **Medallion Signature Guarantee**, and in some cases a Notarized Signature, may be required by some securities firms in order to initiate your transfer. You should contact your particular firm for its requirements. If required, a Medallion Signature Guarantee or Notarized Signature may be obtained at most financial institutions.
- Physical stock certificates may require a **Third Party Release Form** and additional paperwork. Please contact us for additional information.
- **Mutual Fund transfers:** as needed, please (1) contact the Charles Schwab Mutual Fund team at 877.328.0276, (2) enter ImpactAssets' Schwab Account Number (7835-8108) as prompted and choose option "5" to provide the specific mutual fund to be transferred & number of shares with the appropriate representative who will provide a BIN specific to the mutual fund to be referenced in the transfer process.

Please note that some securities firms may be unable to transfer Mutual Fund holdings directly to the Charles Schwab & Co, Inc. account. If you encounter this situation, please contact ImpactAssets and we will assist you in facilitating the transfer.

- Shares should be transferred in kind and are not to be liquidated until received by ImpactAssets.



Account Information

Holding Firm Information

_____ Name of Firm Holding Assets	_____ Account Number
_____ Name(s) on Account	_____ Firm Telephone Number
_____ Firm Mailing Address	_____ Firm Mailing City, State, Zip Code

Please accept this letter as my authorization to irrevocably transfer a portion of the positions from my account with your firm to ImpactAssets, Inc.

_____ Number of Shares	_____ Name of Securities (Symbol if Applicable)	_____ Approximate \$ Value
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		_____ Approximate \$ Total Value

ImpactAssets Brokerage Account Information:

DTC#: 0164, Code 40	Custodian: Charles Schwab & Co, Inc.
Beneficiary Account Name: ImpactAssets Inc.	Beneficiary Account Number: 7835-8108

Signatures

_____ Signature	_____ Name (Please Print)	_____ Date
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Social Security No. of Owner

Medallion Signature Guarantee - ONLY If Required (See Instructions)

_____ Signature of Authorized Officer	_____ Date
_____ Name of Institution and Title	

Notarized Signature - ONLY If Required (attach a Notary Certificate)