

# Digital Tokens Contributions Form

## Instructions

Utilize this form when making an irrevocable transfer of digital tokens for the benefit of your ImpactAssets Donor Advised Fund account.

Without the Digital Tokens Contribution Form we are unable to sell tokens, nor are we able to associate the funds with your donor advised fund account. We are required to collect sufficient support to record the contribution and issue an acknowledgement letter.

To ensure your donor advised fund account is properly credited, please send this form to ImpactAssets before initiating a transfer of digital tokens via:

**Email:** [clientservice@impactassets.org](mailto:clientservice@impactassets.org)

**Fax:** 301.263.7998

**Mail:** ImpactAssets, Inc. 4340 East West Highway, Suite 210, Bethesda, MD 20814

## Section 1 – Donor Advised Fund Account Information

\_\_\_\_\_

ImpactAssets Account Name

\_\_\_\_\_

ImpactAssets Account ID

## Contributor/Donor Information

**Note:** A letter of receipt will be issued by ImpactAssets to the donor(s) listed below. If the contribution is from a trust or another legal entity, please provide the name and address of the trust/legal entity so we can accurately document this in the receipt.

### Donor #1

### Donor #2

\_\_\_\_\_

Name (First, Middle, Last)

\_\_\_\_\_

Name (First, Middle, Last)

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

City State Post Code

\_\_\_\_\_

City State Post Code

\_\_\_\_\_

Email Phone

\_\_\_\_\_

Email Phone

## Section 2 – Digital Token Transfer Details

|                    |                      |       |                      |
|--------------------|----------------------|-------|----------------------|
| _____              | _____                | _____ | _____                |
| Digital Token Name | Digital Token Symbol | Units | Approximate \$ Value |
| _____              | _____                | _____ | _____                |
| Digital Token Name | Digital Token Symbol | Units | Approximate \$ Value |
| _____              | _____                | _____ | _____                |
| Digital Token Name | Digital Token Symbol | Units | Approximate \$ Value |
| _____              | _____                | _____ | _____                |
| Digital Token Name | Digital Token Symbol | Units | Approximate \$ Value |
| _____              | _____                | _____ | _____                |
| Digital Token Name | Digital Token Symbol | Units | Approximate \$ Value |

## Section 3 – Signatures

In recommending this transfer of assets, I make the following attestations:

I attest that this transfer of assets will not yield any personal benefit to myself nor will it contravene any provision of the ImpactAssets Donor Advised Fund [Program Circular](#).

I attest that I am the true and lawful owner of the assets being transferred;

I attest that I affirmatively accept that ImpactAssets will make no representation as to the deductible value of this transfer and that I, as the donor, am solely responsible for obtaining the valuation support necessary to claim a charitable deduction, if allowed, for this donation;

I attest that I affirmatively accept that ImpactAssets makes no guarantee as to its ability to liquidate the donated assets and as such makes no representation as to the net proceeds available to the Account as a result of this donation. Any decrease in value from the date of receipt to the date of liquidation will be borne solely by the Account and no grantmaking or investment activity will be possible from these assets until liquidated.

I attest that I affirmatively accept and understand the counter party, security, and loss of private key risk associated with the donated asset, that ImpactAssets bears no responsibility for any loss resulting from such risks and the Account will bear any related losses;

I attest that I affirmatively accept and understand the regulatory uncertainty risk, and that legislative and regulatory bodies may impose conditions or regulations which may negatively impact the value of the donated assets, and that any resulting loss will be borne by the Account.

|                   |                     |                    |
|-------------------|---------------------|--------------------|
| _____             | _____               | ____ / ____ / ____ |
| Donor 1 Signature | Name (Please Print) | Date               |
| _____             | _____               | ____ / ____ / ____ |
| Donor 2 Signature | Name (Please Print) | Date               |