

**THE HOLSTON CONFERENCE OF THE UNITED
METHODIST CHURCH FOUNDATION, INC.**

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Alcoa, TN 37701-0900
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Fax: (865) 690-3162

FOUNDATION USE ONLY

Account #: _____
Account Type/Category: _____
Date Received: _____
Critical Date / Other: _____

ACCOUNT INFORMATION SHEET

NAME OF ACCOUNT: _____

Participant (Church/Agency) Name: _____

Primary Contact/Title: _____ Statement Mailed? ☐ Yes ☐ No

Primary Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Secondary Contact/Title: _____ Statement Mailed? ☐ Yes ☐ No

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

FREQUENCY OF STATEMENT:

☐ Quarterly ☐ Annual ☐ Other (_____)

PURPOSE OF ACCOUNT: _____

Is this an Endowment? ☐ Yes ☐ No Is there a signed Agreement? ☐ Yes ☐ No

Are there donor restrictions on this fund? ☐ Yes ☐ No If yes, please explain or attach restrictions: _____

ALLOCATION OF INVESTMENT: (may select one or more choices for each account):*

☐ % Balanced Growth Fund ☐ % Short-Term Income Fund ☐ % Money Market Fund
☐ % Intermediate Income Fund ☐ % Equity Growth Fund

*If more than one investment choice is selected please automatically rebalance at least annually ☐ Yes ☐ No

REINVEST ALL EARNINGS INTO:

☐ Balanced Growth Fund ☐ Short-Term Income Fund ☐ Money Market Fund
☐ Intermediate Income Fund ☐ Equity Growth Fund

DISTRIBUTION OPTIONS (NOTES: _____)

A. ☐ Make no automatic distributions. We will contact you when a distribution is needed.

B. Distribute ☐ % Fair Market Value:* ☐ Annually ☐ Semi-Annually ☐ Quarterly Date (s) _____

C. Distribute Dividends and Interest: ☐ Annually ☐ Semi-Annually ☐ Quarterly Date (s) _____

D. Distribute: \$ _____ ☐ Annually ☐ Semi-Annually ☐ Quarterly Date (s) _____

* We encourage an annual year-end valuation of endowments and a sliding scale of 0%-5% of a rolling three-year market value. Studies suggest that a 4% of a rolling three-year average will keep the real spending power of an endowment from decreasing due to inflation. We recommend that a separate spending account be established in the Foundation to annually move the approved spendable amount from the endowment.

The following individuals (up to two) are authorized to make written withdrawals or changes to the account:

Printed Name / Title Signature Date

Printed Name / Title Signature Date

Additional **deposits** to accounts should be **mailed** to our **ALCOA** address. Please make **checks payable** to: **THE HOLSTON CONFERENCE FOUNDATION** and indicate the account name/number to which the deposit is to be made. Additional account forms, investment policy, investment performance, and other information are available on our website www.holston.org/foundation.