

FOR OFFICE USE ONLY
Security Number:
Interest Rate:
Representative:

# UNITED PENTECOSTAL CHURCH DEVELOPMENT FUND, Inc. d/b/a United Pentecostal Church Loan Fund

## INDIVIDUAL PURCHASE APPLICATION AND AGREEMENT

If you have additional questions about this application, please call (636) 229-7900. Please print clearly using a ballpoint pen.

The offer and sale of Investment Certificates ("Certificates") are subject to the terms of the United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund Offering Circular dated February 25, 2022, as may be supplemented, amended and restated ("Offering Circular"), which is incorporated herein by reference. The United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund reserves the right to refuse your application and not offer or sell any Certificate to you for any reason. ☐ NEW APPLICATION ☐ CHANGE OF INFORMATION PART I: INVESTOR INFORMATION **Primary Applicant** Name Social Security or Tax I.D. Number Date of Birth: mo/day/year Email Address (optional) Address Citv State Zip Home Phone Work Phone Mobile Phone This application is to be used by individual applicants. You may select only one of the following additional ownership categories. If you do not select any of the following options, we will issue the Certificate solely in the name of the primary applicant. ☐ Joint Tenants. If you select this option, we will issue the Certificate to the primary applicant and joint applicant as joint tenants with right of survivorship, unless you elect below to hold this Certificate as tenants-in-common. We will honor the request of either co-owner to redeem a Certificate, effect a transfer or take any other action requiring the consent of the holder of the Certificate. Joint Applicant (if applicable) Name Social Security or Tax I.D. Number Date of Birth: mo/day/year Email Address (optional) Address City State Zip

Work Phone

Home Phone

Mobile Phone

$\hfill \Box$	as tenants-in-comn	non, not as joint	tenants with righ	t of
For joint applications, please indicate the number of signa	tures required to p	rocess a redemp	tion request:	
□ (1) □ (2)				
$\hfill Trust$ . If you check this box, the Certificate will be issue If there is more than one trustee, each trustee must be ide			ant, as trustee of	the trust.
Name and Date of Trust				
Name of Trustee				
Name of Additional Trustee (If Applicable)				
Tax I.D. Number of Trust				
If there is more than one trustee, will all trustees be requir	ed to exercise trust	powers? □ ye	s 🗆 no	
☐ Custodian. Custodial investments are subject to the Mis checked, we will issue the Certificate to the primary applicate election will be irrevocable and the Certificate will become the age of 21. We advise you to contact a qualified attorned	nt listed above for the unrestricted pro	the minor descri	bed below. By lagor when the mind	w, this or reaches
Minor's Name		Minor's Social	Security Number	
Minor's Date of Birth: mo/day/year		Relationship to	Owner Owner	
Transfer investment to Minor at age (cannot exceed age 21)				
PART II: TYPE OF CERTIFICATE / INTEREST OPTIO	NS			
☐ One-Year Term Certificate ☐ Three-year Term Certificate	☐ Five-year Term C	ertificate (\$5,000 n	ninimum on Term C	Certificates)
☐ Negotiated Investment (\$250,000 Minimum) year term	% Interest R	ate		
$\ \square$ Kingdom Impact Certificate (\$250 Minimum) (Not available in	LA , PA or SC) ☐ Th	ree-Year Loan Sup	port Certificate (\$1,	000 minimum)
☐ Five-Year Loan Support Certificate (\$1,000 minimum) ☐ Ki	ngdom Growth Certifi	cate (\$1,000 Minir	mum)	
TOTAL INVESTMENT: \$				
PART III: PAYMENT ON DEATH (Please attach a separate	sheet for additional b	eneficiaries)		
By completing this section, you authorize us to pay the principal and accrued interest on your Certificate to the named beneficiary, custodian or Section 501(c)(3) tax-exempt organization designated below, after your death (or in the case of joint tenants, after both of your deaths). Please fill-in the name, address and social security number (or Tax I.D. number) of your intended beneficiaries. Beneficiary designations may be changed or revoked by notice sent to us prior to the death of the Certificate holder. If you would like to designate the United Pentecostal Church International or a specific affiliated church, ministry or fund as your designated beneficiary, please fill-in the name of the UPCI or UPCI affiliated church ministry or fund.				
Transfer on Death to:				
Name	Relationship	Social Sec	urity or Tax I.D. Nu	mber
Address		City	State	Zip
PART IV: CHURCH AFFILIATION (Please Check all applic	able)			

☐ I am a member of a United Pentecostal Church International affiliated church
Name of Church City State
I have an existing relationship with and interest in promoting the work of the United Pentecostal Church International and its affiliated agencies and ministries.
Please tell us how you became interested in the Certificates (check all that apply):
☐ Website ☐ Social Media ☐ Pentecostal Life or other UPCI Publication ☐ Friend/Colleague ☐ Conference/Camp Meeting
☐ Other. Please help us understand what prompted you to invest in the Certificates using the space below:
PART V: ELECTRONIC FUNDS TRANSFER
(Initials) I desire to have United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fundorocess any specific request for electronic transfers received in United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund's office for transfer to and/or from my account at the bank named below:
Bank Name
Sank Phone
ANK I HORE
ank Account Number
lease complete an Electronic Funds Transfer Form for this section.
PART VI: DISTRIBUTION OF INTEREST (Please place your initials next to your selection, if no option is selected default will be 'Accumulate and compound in my investment")
Accumulate and compound in my investment
Pay me quarterly by check
Pay me annually by check
Pay to me by electronic funds transfer (Please complete Part V above and attach a voided check): [ ] quarterly [ ] annually
Zero-Interest Rate. If you wish to donate the interest payments to a designated United Pentecostal Church, mission, fund or agency, you may do so by checking this box. (Please attach letter of instruction in selecting this option)

### **ACKNOWLEDGEMENT** (Signatures required)

Each person signing below declares under penalty of perjury that such person(s): 1) meets the definition of "Eligible Investor" set forth in United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund's Offering Circular; 2) has reviewed the Offering Circular and the financial statements reproduced therein; and 3) agrees to the terms and conditions described in the Offering Circular dated February 25, 2022. All previous versions of the Purchase Application are null and void. The Fund reserves the right to accept or reject any Purchase Application for any reason, at its sole discretion.

X	
Signature	Date
X	
Signature	Date

Please mail this Purchase Application with a check payable to United Pentecostal Church Loan Fund for the amount of your investment to 36 Research Park Court, Weldon Spring, Missouri 63304, unless you have elected to have funds electronically transferred.

The purchase of Certificates is subject to risks which are described in the Offering Circular. Offers to sell and solicitation of offers to buy Certificates are made only pursuant to the Offering Circular and only in those states where the Certificates may lawfully be offered or sold. The Certificates are not FDIC or SIPC insured nor are they bank deposits.

Interest rates are established according to policies set forth in the Offering Circular and are subject to change. For a complete listing of current investment rates, call (636) 229-7900 or visit <a href="www.upcloanfund.org">www.upcloanfund.org</a>.

Pennsylvania Residents: If you have accepted an offer to purchase these Certificates and have received a written notice explaining your right to withdraw your acceptance pursuant to section 207(m)(2) of the Pennsylvania Securities Act of 1972, you may elect, within two business days from the date of receipt by the issuer of your binding contract of purchase or, in the case of a transaction in which there is no binding contract of purchase, within two business days after you make the initial payment for the Certificates being offered, to withdraw you acceptance and receive a full refund of all moneys paid by you. Your withdrawal of acceptance will be without any further liability to any person. To accomplish this withdrawal, you need only send a written notice (including a notice by facsimile or electronic mail) to United Pentecostal Church Development Fund, Inc. indicating your intention to withdraw.

**Georgia Residents:** See the Offering Circular for right of rescission.

### SPOUSAL CONSENT

For applicants that are married and reside in a community property state, please review the following:

If you are married, reside in a community property or marital property state (listed below) and designate someone other than your spouse as your sole primary beneficiary, your spouse must sign below. (AZ, CA, ID, LA, NV, NM, TX, WA and WI residents only)

I am the spouse of the Certificate Owner named above. I give to the owner any interest I have in the Certificate. Therefore, I agree to my spouse's naming of a primary beneficiary other than myself. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. I also acknowledge that I shall have no claim whatsoever against United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund for any payment made to my spouse's named beneficiary(ies).

X		
Signature of Certificate Owner's Spouse	Date	Spouse of

#### **SUBSTITUTE W-9 FORM**

United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund (the "Fund") is required to obtain your correct Taxpayer Identification Number (for individuals this is your social security number) in order to report to the Internal Revenue Service (IRS) interest paid to you. The Fund, like any other payer of interest or dividends, must withhold 28% of the interest paid if you fail to furnish the Fund with your correct Taxpayer Identification Number or if you fail to sign the acknowledgement portion of the Purchase Application. This is referred to as "backup withholding". For more information on backup withholding, please visit <a href="https://www.IRS.gov">www.IRS.gov</a>.

Under penalties of perjury, I certify that 1) the Social Security Number or the Tax Identification Number shown on this application is correct; 2) I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding; and 3) I am a U.S. person (including a U.S. resident alien).

(NOTE: You must cross out item 2) above if you have been notified by the IRS that you are currently subject to backup withholding because you failed to report all interest and dividends on your tax return.)

			X		
Name		Signature	Signature		
Social Security or Tax I.D. Number		Date			
Address					
City	State	Zip	<del></del>		