

QUARTERLY INCOME DESIGNATION

Use this form to update how quarterly income distributions, if any, are handled for your UCF account(s). You may choose to have distributions either reinvested in the applicable UCF account or paid to the Organization's bank account on file.

Changes will take effect with the next quarterly income distribution processed after UCF receives and accepts complete instructions.

Secure Submission

For your protection, forms containing banking information, account numbers, donor information or other sensitive data should be submitted through [UCF's secure upload page](#) whenever possible. Completed forms may also be submitted to UCF Client Services at info@ucfunds.org.

1. UCF ACCOUNT INFORMATION

Please list each UCF account for which you would like to change the quarterly income designation, and select the new designation for each account.

Organization Name: _____

Account Number	Current Designation		New Designation	
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out
	☐ Reinvest	Or ☐ Paid Out	☐ Reinvest	Or ☐ Paid Out

2. AUTHORIZATION

By signing below, the Authorized Officer certifies that they have the authority to provide the instructions set forth in this form on behalf of the Organization. UCF may rely on these instructions in accordance with the Organization's Master Participation Agreement and any other applicable agreement governing the account.

Authorized Officer Name: _____

Signature: _____ Date: _____