



The Community Reinvestment Act  
 Qualified Investment Fund  
 CRA Shares

CRA Qualified Investment Fund  
 P.O. Box 2175  
 Milwaukee WI 53201-2175  
 Fax: 1-414-299-2178  
 Telephone: 866-202-3573

A corporate resolution (and certificate of incumbency if the corporate resolution is more than 60 days old) is required along with a completed application to open an account.

## SHAREHOLDER APPLICATION

Date: \_\_\_\_\_

### 1. ACCOUNT REGISTRATION—Please Print

Name \_\_\_\_\_  
 (Complete Corporate Name) Taxpayer Identification Number \_\_\_\_\_

Address \_\_\_\_\_  
 (Street Address)

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Principal Office (if different from address above) \_\_\_\_\_  
 (Street Address)

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

### 2. INITIAL INVESTMENT—\$500,000 minimum investment— Payable to The CRA Qualified Investment Fund

Enclosed is \$ \_\_\_\_\_ and/or money wired \_\_\_\_\_

**Fax and Bank Wire Instructions:**

- 1) Call CRA Qualified Investment Fund at 1-866-202-3573 to advise us that you will be faxing an application
- 2) Fax the completed application to 414-299-2178
- 3) Upon receipt a representative will establish the account and call you with the account number
- 4) Wire funds (wire instructions below)
- 5) Mail the original completed application to the address below
- 6) Any questions, please call 1-866-202-3573

Wire Instructions: UMB Bank, n.a.  
 ABA Routing Number 101000695

For credit to: CRA Qualified Investment Fund  
 A/C # 9871418510

For further credit to: CRA Qualified Investment Fund  
 Name of investor  
 CRA Qualified Investment Fund Account number  
 Tax ID Number

**Mail the completed application and check to:**  
 CRA Qualified Investment Fund  
 P.O. Box 2175  
 Milwaukee, WI 53201-2175

**For overnight/express deliveries, send to:**  
 CRA Qualified Investment Fund  
 235 W. Galena Street  
 Milwaukee, WI 53212

**By Check:**

Complete the application and make checks payable to “CRA Qualified Investment Fund”.

### 3. DIVIDEND AND CAPITAL GAINS INSTRUCTIONS — All dividends will be reinvested unless one of the following is checked.

- Pay dividends and capital gains in cash. A check will be sent to the address of record.
- Pay dividends and capital gains to the bank listed in Section 5 by wire.

#### 4. BROKER/DEALER USE ONLY — Please Print

Dealer #

Securities Dealer Name \_\_\_\_\_

Main Office Address \_\_\_\_\_

Branch # \_\_\_\_\_ Rep # \_\_\_\_\_ Representative Name \_\_\_\_\_

Branch Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Authorized Signature, Securities Dealer \_\_\_\_\_ Title \_\_\_\_\_

Is this account subject to SEC Rule 22c-2?  Yes or  No

If yes, an information sharing agreement must be signed before the initial purchase is placed.

#### 5. BANK INFORMATION

You must complete this section if you would like the ability to add to your account electronically or have redemption proceeds sent to your bank electronically.

Bank \_\_\_\_\_

Bank Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bank Phone Number \_\_\_\_\_ Name(s) on Bank Account \_\_\_\_\_

Bank Account Number \_\_\_\_\_ Bank Routing Number \_\_\_\_\_

#### 6. SIGNATURE AND TAX CERTIFICATIONS

By signing this Application for the purchase of shares of The CRA Qualified Investment Fund I/we hereby acknowledge receipt and review of the Fund's Prospectus and this Application form; represent to the Fund and its agents that I/we am/are duly authorized to sign this form and to purchase or redeem shares of the Fund on behalf of the corporation.

I/we acknowledge that shares of the Fund are not insured or guaranteed by any agency or institution and that an investment in fund shares involves risks, including the possible loss of the principal amount invested.

I/we certify that I/we are not a Foreign Financial Institution as defined in the USA PATRIOT Act.

For purpose of IRS Regulations, I/we certify under penalties of perjury that the investor is a corporation validly organized and in good standing in its state of incorporation, and that the taxpayer identification number provided herein is correct.

**Notice to all shareholders:** In compliance with applicable state laws, your property may be transferred to the appropriate state if no activity occurs in your account within the time period specified by state law.

##### By completing Section 5 and signing below:

I authorize credits/debits to/from the bank account referenced in conjunction with the account options selected. I agree that the CRA Qualified Investment Fund shall be fully protected in honoring any such transaction. I also agree that the CRA Qualified Investment Fund may take additional attempts to credit/debit my account if the initial attempt fails and I will be liable for any associated costs. All account options selected (if any) shall become part of this application and the terms, representations and conditions thereof.

By selecting the box below, I am certifying that I am **NOT** a U.S. Citizen.

I am a Resident Alien

##### REQUEST FOR TAXPAYER IDENTIFICATION NUMBER (Substitute Form W-9)

Under penalty of perjury, I certify that:

1. The Social Security Number or Taxpayer Identification Number shown on this application is correct.
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding.
3. I am a U.S. person (including a U.S. resident alien).
4. I am exempt from FATCA reporting.

**Certification Instructions:** 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 have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

**The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

I hereby certify: i) that I am the duly qualified \_\_\_\_\_ of \_\_\_\_\_, a \_\_\_\_\_ duly organized and existing under the laws of \_\_\_\_\_.

**OR**

**CORPORATE SEAL**

ii) that \_\_\_\_\_ is (are) the currently acting [trustee(s)] [partner(s)] of \_\_\_\_\_.

That all actions by shareholders, directors, trustees, partners, and other bodies necessary to execute the Purchase Application and establish an account with The CRA Qualified Investment Fund have been taken:

Signature of certifying officer \_\_\_\_\_ Date \_\_\_\_\_

Please make a photocopy of this application for your records.

Check here if you prefer that Community Capital Management, Inc. **not** use the name of your organization in marketing materials.