

THE LEGACY SOCIETY Statement of Planned Gift Intention

Thank you for your intention to include the Idaho Community Foundation as a partner in your estate plans. We ask you to please complete this form with as much information as you are comfortable sharing about your charitable giving fund. Any information about your planned gift does not create a binding obligation.

The Idaho Community Foundation created the Legacy Society to honor those who have committed future philanthropic support to Idaho communities in partnership with ICF. Your planned gift will shape the future of Idaho and support the community organizations and causes that are meaningful to you.

Name	e of Legacy Fund:
Purpo	ose of Legacy Fund. It is my wish that the gift be used:
	For Idaho's greatest needs, as determined by the Idaho Community Foundation
	To support the work of a specific organization(s). Please specify:
	To support a cause (arts, education, etc.) or region/county of Idaho. Please describe:
	To create a scholarship. Please describe:
	Name(s):ess:
	State:Zip:
Phone	e: Email:
Date(s) of Birth:
I/we l	have made provisions for a gift to the Idaho Community Foundation through a: Outright Bequest in my will • Specific dollar amount: \$ • Percentage of estate:%
	Specific property:

	remainderman or co-remainderman. Please describe the conditions of the trust,
	including ages of income beneficiaries.
	Life Insurance Policy: \$
	Retirement assets in which the Idaho Community Foundation is named as a beneficiary. Estimated Value: \$
	Other (Please describe):
	Estimated Value: \$
	e let us know if you would like to be recognized as a public or non-public member of CF Legacy Society:
	Public Legacy Society Member. Name will appear in member lists. Name(s) should appear as follows:
	Non-Public Legacy Society Member: Name will be excluded from member lists.
would availa confid notify	'Statement of Planned Giving Intention" is non-binding. For record-keeping purposes we dispreciate a copy of the section of your will, trust or other document , if able, which substantiates the provision(s) listed above. We will keep the information in a dential file. In the event your estimated provisions change, we would appreciate you ring us of such a change. Any action that affects your overall estate plans should be used with your professional advisors.
Date:	
Signa	ture:
Signa	ture:

Please return the completed form to <u>info@idahocf.org</u> or Idaho Community Foundation, 210 West State Street, Boise, ID 83702. For more information: <u>info@idahocf.org</u> or 208-342-3535.

We'd love to know a little more about you. Please share your story with us on the next page.

Please tell us why you chose to create a Legacy Fund at the Idaho Community Foundation.
What is important for us to know about your Legacy Fund and/or the organization, cause, region or scholarship recipients it will benefit?
What led you to choose the organization, cause, region or scholarship recipients that will benefit from your Legacy Fund?
How did you learn about ICF Legacy Funds?
Anything else you'd like to share about yourself or the organization, cause, region or scholarship recipients that will benefit from your Legacy Fund?
May we share your story?