



**The Legacy Society**  
of the  
Wabash Valley Community Foundation



**CONFIDENTIAL STATEMENT OF INTENT**

**The Legacy Society** provides a way for the Wabash Valley Community Foundation to recognize generous individuals who have included the Community Foundation in their estate plan. Those donors understand that a planned gift to the Community Foundation is a simple way to contribute to the future well-being of our community and, in some cases, to create a favorable tax situation. Our deep felt appreciation goes out to those who set aside a gift for their community through the Community Foundation, and we appreciate those who let us know of their intentions to do so.

*“It takes a noble person to plant a seed for a tree that will some day give shade to the people they may never meet.”*      David Trueblood

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (home) \_\_\_\_\_ (office) \_\_\_\_\_ (cell) \_\_\_\_\_

E-mail \_\_\_\_\_

I/We have made the following provisions for a deferred gift to the Wabash Valley Community Foundation

- Bequest through a will or living trust
- Life insurance designation
- Retirement plan designation
- Charitable gift annuity
- Charitable remainder trust
- Real Estate donation
- Other \_\_\_\_\_

Please provide any details that you are willing to share about the gift: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Donor Recognition**

In recognizing this gift, the Wabash Valley Community Foundation is authorized to list the following name(s) as member(s) of the **The Legacy Society**:

\_\_\_\_\_  
Name(s)

- I/We have made provisions for a gift but prefer confidentiality and wish to remain an anonymous member(s) of **The Legacy Society** of the Wabash Valley Community Foundation. I/We would request that the Community Foundation never use my/our name in its promotional materials. I understand that my/our fund will be listed as Anonymous Fund.

**Donor Intent**

It is my/our wish that the gift be used in:

- Clay County  
 Sullivan County  
 Vigo County

For the checked identified purpose below

- At the Foundation’s discretion, to create the greatest impact in our community by supporting its most compelling needs and opportunities.  
 For the following existing fund(s)  
\_\_\_\_\_  
 I would like to work with the Community Foundation to create a specific Fund Agreement that details the purpose of my gift. Please contact me.

**Family History Option**

- I/We would like to arrange for a confidential interview so that a brief history of my/our family and our philanthropy may be prepared and archived at the Wabash Valley Community Foundation.

**This statement of intent is nonbinding.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_