

LEGACY SOCIETY GIFT FORM

Thank you for your generous commitment to Nevada Women's Fund. Planned gifts are uniquely powerful in sustaining and growing Nevada Women's Fund's ability to *Empower Women to Achievement* in Northern Nevada. A planned gift enables you to tremendously impact the advancement of women in our community for years to come.

We ask that you, your legal or financial representative, or executor complete this form so we can understand the intentions for your gift. The information you provide is not legally binding, and we know you may wish to change your gift in the future. Nevada Women's Fund honors all requests for anonymity. Please let us know how you would like to be recognized for your gift on the reverse side of this form.

ABOUT TOU

Name	e(s):
	of Birth:
•	PSS:
	e: Email:
<u>Cont</u>	act Person
Name	e(s):
Addre	PSS:
Phone	e: Email:
If you estimated or need	<u>UT YOUR GIFT</u> are willing to disclose more information about your gift, please check all that apply and ate the value of each gift in today's dollars. If you have questions about the ways to give ed help documenting your gift, please contact us. We are also always happy to
input.	orate with your legal, tax, and professional advisors and recommend you seek their
	Will: \$
0	···
0	Real Estate: \$
0	Charitable Remainder Trust: \$
0	Retirement Plan/IRA: \$
0	Other Trust/Asset: \$

Nevada Women's Fund uses charitable gifts to support its most pressing needs unless otherwise specified by the donor. If the purpose for which you directed your gift becomes obsolete, impossible, or impracticable, any unused portion will be designated for alternative uses, keeping in mind your original intent.

- I would like this gift to be unrestricted to provide maximum impact for NWF.
- I would like to designate this gift for a specific department or purpose. If applicable, please tell us how to direct your gift (Endowed Scholarship, Summit Project, Other (Please specify)

ADDITIONAL INFORMATION ABOUT YOUR GIFT

Is your gift contingent? A contingent gift comes to Nevada Women's Fund only if the other named beneficiaries do not survive you.

- o Yes
- o No

If yes, please explain.

How would you like to be recognized for your gift?

o I would like to be listed as a Legacy Society member, which may include listing my gift within a dollar or % range.

Please list my name as: ____

- I prefer my gift not to be listed within a dollar or % range, but I would like to be listed as a Legacy Society member.
 Please list my name as:
- o I am willing to be featured in an article regarding my gift. (If you check this box, a staff member will contact you.)
- o I wish to remain anonymous.

SIGNATURES

Name:	Date:
Name:	Date:

Thank you!

Please return this form to Nevada Women's Fund.

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