TO:



Jeannamarie Cox Executive Director Yellow Springs Community Foundation ("YSCF") P.O. Box 55 Yellow Springs, OH 45387

RE: My legacy pledge to the Yellow Springs Community Foundation (EIN 23-7372791)

Dear Executive Director Cox and the YSCF Board of Trustees,

I am pleased to write to you today to let you know that I have included the YSCF in my estate planning. I have created a legacy gift from a (check all that apply):

- Bequest in my will or codicil
- 401K, IRA or other retirement plan
- Beneficiary of life insurance or annuity proceeds
- Beneficiary of a savings/checking/money market/stock or other account
- Charitable gift annuity
- Trust
- Other: ______

Optional: The estimated value of this gift is approximately: \$_____.

I give this gift to the YSCF for the following purpose(s) (choose one or a combination):

•	UNRESTRICTED. I intend for my gift to be used for any charitable purpose as	
di	rected by the YSCF Board of Trustees. Percentage of gift unrestricted: %	

•	RESTRICTED. I want to restrict %	of the gift that the YSCF will receive for
th	e benefit of the following YSCF sub-funds	(see <u>www.yscf.org</u> for list of funds):

Fund #1:	Percentage of gift: %
Fund #2:	Percentage of gift: %
Fund #3:	Percentage of gift: %
Fund #4:	Percentage of gift: %

• RESTRICTED FOR A NEW FUND. I would like to speak with YSCF staff about starting a new fund. I understand that the YSCF Board of Trustees must approve a new fund.

For restricted gifts, I understand that if any of the named organizations and their associated fund no longer exist at the time of the distribution, then it is my intention that the YSCF Board of Trustees distribute the funds (or any remaining balance from my gift in the Fund) exclusively for charitable purposes that most nearly approximate, in the good faith opinion of the Board of Trustees, my original intent.

I understand that my gifts to these funds will be subject to the YSCF Fee schedule.1

This Pledge is an expression of my present plans and is subject to change or modification by me. All information contained herein is to be held in strict confidence.

Signature:
Date:

Printed name:
Address:

Signature:
Date:

Printed name:
Date:

Thank you for your pledge! The YSCF recognizes the generosity of donors per their wishes. My wishes regarding listing me in YSCF publications as a Legacy Donor are:

• I wish to remain anonymous.

Sincerely yours,

• I give YSCF permission to list my name as a legacy donor.

or
\$

other designation (such as In Memory of...)_____.

Pledge letter prepared by: Laura A. Curliss, Attorney at Law, P.O. Box 421, Yellow Springs, Ohio 45387. 513-600-7171. curlisslegal@gmail.com

¹Legacy Gifts Schedule: For gifts that come to YSCF or a YSCF fund via a bequest, trust or similar transfer, a one-time 1% fee will be assessed upon completion of the transfer to the YSCF.