



Legacy Gift Statement of Intent

Thank you for your generous commitment to Rooted WI, INC. To better understand your intentions for this gift, we ask that you please complete this form with as much detail as you are comfortable sharing. The information you provide is not legally binding and we understand that you may wish to change your gift in the future. Questions? Please call Rooted at 608.286.9883

Your Contact Information

Name(s)

Address

City State Zip

Phone Email*

*You will receive occasional email updates from Rooted. We will not sell, rent or exchange your email address

About Your Gift

If you are willing to disclose information about your gift, please check all that apply. If you choose to provide an estimate of the value of your gift, please use today's dollars:

- | | |
|--------------------------|---------------------------------|
| <input type="checkbox"/> | ➤ Life Insurance Policy |
| <input type="checkbox"/> | ➤ Charitable Gift Annuity |
| <input type="checkbox"/> | ➤ Will |
| <input type="checkbox"/> | ➤ Trust |
| <input type="checkbox"/> | ➤ IRA or Retirement Plan Assets |
| <input type="checkbox"/> | ➤ Charitable Remainder Trust |
| <input type="checkbox"/> | ➤ Other: _____ |

The approximate value of my gift is \$_____ or %_____ of my estate or residue. (Optional)



Your Gift Will Support (Total must equal 100%)

- % Highest Organizational Priorities (unrestricted)
- % Troy Farm
- % Badger Rock Neighborhood Center
- % Education Programs
- % Community Gardens Network

Acknowledging Your Gift

- Rooted may publicly acknowledge my / our gift
- Anonymous
- If anonymous, you may publicly recognize my/our gift once it is realized

Signature(s):

X

X

Alternative / Additional Directions:

Sample Language to include a planned gift as part of your will:

I/we bequeath to Rooted WI, INC (tax ID# 39-1854762), located in Madison, Wisconsin, %____ of my residual estate – OR – the sum of \$_____ to be used for charitable purposes set forth in a Statement of Intent or a Letter of Understanding held by Rooted WI, INC.

Please return completed and signed form to: Rooted WI, INC 517 East Badger Road Madison, WI 53713
or, via email to: cass@rootedwi.org