

## Signatures

I acknowledge that I have read the Planned Gift Fund Agreement and agree to its terms and conditions described therein. I hereby certify that, to the best of my knowledge, all information presented in connection with this application is accurate and I will notify the Community Foundation of Randolph County promptly of any changes.

\_\_\_\_\_  
DONOR SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DONOR SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
LISA JENNINGS, EXECUTIVE DIRECTOR

\_\_\_\_\_  
PRINT NAME

*Please return this form to:*

**Community Foundation of Randolph County**  
120 W Washington St, Winchester, IN 47394  
765.584.9077 | randolphcountyfoundation.org



**COMMUNITY FOUNDATION**  
of RANDOLPH COUNTY  
*BRINGING PEOPLE & RESOURCES TOGETHER*

## Bequests

A bequest, in the context of charitable giving, is a gift made to charity under a will or a will substitute such as a revocable trust. Bequests are extremely flexible and can be structured in any of the following ways:

FORM OF BEQUEST	EXAMPLE
A specific dollar amount	I leave the Community Foundation \$25,000.
A percentage of the total estate	I leave the Community Foundation 10% of my gross estate.
A percentage of the residue	After distribution of the specific bequests (to other beneficiaries) and payment of expenses and taxes, I leave the Community Foundation one-third of the residue of my estate
All of the remainder	I give the Community Foundation all of the property remaining after paying debts, expenses, and specific bequests
A specific class of property	I leave the Community Foundation of all my savings bonds.
A specific asset	I leave the Community Foundation my residence at 123 Winchester Avenue, Winchester, Indiana.
A formula distribution	I leave the Community Foundation an amount equal to ten times the size of the average gift made to the Community Foundation over the last three years of my life.
A contingent bequest	In the event my wife does not survive me, I give the property set aside for my wife to the Community Foundation

*For specific bequest language, please speak to a Representative at the Community Foundation of Randolph County.*

# Planned Gift Fund Agreement



**COMMUNITY FOUNDATION**  
of RANDOLPH COUNTY

BRINGING PEOPLE & RESOURCES TOGETHER

- New planned gift fund agreement
- Information update

It is my intention to make a planned (deferred) gift to the Community Foundation of Randolph County (CFRC) the property as described or specified in the following:

- My/our will
- My/our trust
- Beneficiary designation on my/our life insurance
- Beneficiary designation on my/our retirement assets
- Other:

\_\_\_\_\_  
\_\_\_\_\_

Executed on \_\_\_\_\_  
DATE

- Copies of my planning document(s) are attached to this document.

### Heritage Society Information

The Heritage Society recognizes the generosity of donors who support CFRC through deferred gifts. Heritage Society members are listed in CFRC's annual report, website, and other publications.

- I/we wish to be recognized as a Heritage Society member.
- I/we DO NOT wish to be recognized as a Heritage Society member.

### Donor Information

\_\_\_\_\_  
DONOR NAME

\_\_\_\_\_  
DONOR NAME

\_\_\_\_\_  
BIRTHDATE(S) (OPTIONAL)

\_\_\_\_\_  
PERMANENT ADDRESS

\_\_\_\_\_  
PERMANENT ADDRESS

\_\_\_\_\_  
CITY/STATE/ZIP

\_\_\_\_\_  
PRIMARY PHONE NUMBER

\_\_\_\_\_  
ALTERNATE ADDRESS

\_\_\_\_\_  
CITY?STATE/ZIP

- Seasonal
- Business

\_\_\_\_\_  
EMAIL ADDRESS

\_\_\_\_\_  
NAME/TITLE OF PERSONAL REPRESENTATIVE/TRUSTEE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY?STATE?ZIP

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
EMAIL ADDRESS

**Option 1:**

***Contribute an Existing Fund***

You may designate your gift to an existing fund. Select a fund that you established previously or choose one that suits your charitable interests from among the many CFRC funds.

\_\_\_\_\_% Name of existing fund: \_\_\_\_\_

\_\_\_\_\_% Name of existing fund: \_\_\_\_\_

\_\_\_\_\_% Community Foundation Enrichment Fund  
(to address our community’s needs and opportunities, today and tomorrow)

\_\_\_\_\_% Community Foundation Operating Endowment Fund  
(to permanently support the activities of the Community Foundation)

**Option 2:**

***Establish a New Fund***

You may establish a named fund with a minimum gift of \$10,000. Your gift will become a permanent fund held at CFRC. Name the fund as you like, such as for yourself or your family, or to memorialize or honor a loved one (e.g., “Mary Smith Fund”), or use any other name (e.g., “Good Works Fund”). Use additional sheets for multiple funds.

The name you have chosen for your fund is: \_\_\_\_\_

We are pleased to offer a wide variety of fund types to meet your charitable goals. Indicate the type of fund you wish to establish using the guidance below and on the next page.

\_\_\_\_\_% **Legacy Fund**

Broadly and boldly supporting the widest array of community needs, even as those needs change over time. The fund carries the name you select to leave a personal or family legacy of giving

\_\_\_\_\_% **Field of Interest Fund**

Grants made possible by your gift are targeted to an area of personal interest. You elect the focus area, and our staff, board, and diverse community panels select the most qualified organizations and programs within that field to receive grants each year. Examples of interest areas might include the arts, health and wellness, or reading literacy.

Interest Area:  
\_\_\_\_\_

\_\_\_\_\_% **Designated Fund**

Grants made possible by your gift provide permanent support to a specific nonprofit organization each year. Should the organization you name cease to exist in the future, CFRC will redirect grants to the next most closely related organization. Name the recipient organization below:

\_\_\_\_\_  
ORGANIZATION

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
CITY/STATE/ZIP

\_\_\_\_\_  
PHONE NUMBER

Additional information about the chosen organization is attached

\_\_\_\_\_ % **Scholarship Fund**

Your gift will provide scholarship for students pursuing higher education. You may establish criteria around particular fields of study, geographic location, economic circumstance, or other demographic characteristics. *Please request our scholarship criteria worksheet for more information.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SELECTION CRITERIA

Information about additional details on the selection criteria is attached.

\_\_\_\_\_ % **Donor Advised Fund**

Advisors are actively involved with recommending grants to charitable organizations. CFRC continues to make grants after all advisors are gone. You may name advisors to the fund who remain involved by suggesting ongoing uses for your gift. Please request our Donor Advised Fund Guidelines for further information on grant restrictions and requirements for advisors.

\_\_\_\_\_  
FUND ADVISOR NAME

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
CITY/STATE/ZIP

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
EMAIL ADDRESS

**Spending Policy & Terms**

Distributions from the fund will be made in accordance with CFRC's Spending Policy. CFRC's current Spending Policy provides for the Board of Directors to set an annual Spending Rate between zero and five percent based on a five-year lookback of investment returns. The Rate is applied by averaging the fair market value (FMV) of the fund over the previous 12 quarters. The Spending Policy may be modified by CFRC at its sole discretion.

By signing this agreement, I acknowledge and agree that any newly created fund(s) shall be held and distributed in accordance with the following terms and conditions:

1. This conveyance will constitute an outright contribution to the Community Foundation of Randolph County to be used in carrying out its charitable purposes.
2. The Fund(s) shall be administered by CFRC as a component fund(s). I/we have listed in this document and in any attachments the desired fund type(s) and, where applicable, the areas of charitable interest and/or specific charitable organizations that I/we recommend the Fund(s) support.
3. CFRC may, in its discretion, accept additional contributions to the Fund from others.
4. The Fund(s) will be charged an administrative fee in accordance with the fee schedule as approved by the Board of Directors. The fee schedule is subject to change at the sole discretion of CFRC.
5. Allowing for the areas of charitable interest and/or specific charitable organizations listed in this document and any attachments thereto, CFRC shall nonetheless have authority and control over all property in and distributions from the Fund, as is consistent with IRS regulations and CFRC's charitable purpose and variance power, as set forth in CFRC's governing documents, which currently state: *"The Board of Directors of CFRC shall have the power to modify any restriction or condition on the distribution of funds for any specific charitable purposes if, in the sole judgement of the Board of Directors (without the necessity of approval of any participating trustee or agent), such restriction or condition becomes, in effect, unnecessary, incapable of fulfillment, or inconsistent with the charitable needs of Randolph County, Indiana."*
6. Assets of the Fund may be combined for purposes of investment with other assets of CFRC.
7. It is CFRC's expectation that the fund will be maintained in perpetuity. Distributions from the fund will be subject to CFRC's Spending Policy.
8. It is intended that the Fund shall be a component fund of CFRC and not a separate trust, and that nothing in this Agreement shall affect the status of CFRC as an organization describe d in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, and as an organization which is not a private foundation within the meaning of Section 509(a) of the Code.