



CONFIDENTIAL ESTATE PLAN GIFT INTENTION FORM

I would like to support NRCM through my estate plan as follows:

DONOR INFORMATION

NAME, BIRTHDATE, PREF ADDRESS, STREET, CITY, STATE, ZIP, PHONE, Home, Cell, EMAIL, I have a seasonal address. Please contact me for details.

TYPE OF ESTATE COMMITMENT

Gift type:

- Will or Revocable Trust provision
Charitable Gift Annuity
Life Insurance beneficiary* Company: Policy #:
IRA or Retirement Plan beneficiary**
Charitable Remainder or Lead Trust Company (please supply details next page):
Donor-Advised Fund beneficiary

*Life insurance and retirement account companies have no legal responsibility to notify the charity that it is a beneficiary
**Donor-Advised Fund administrators may roll any remaining funds into a general charitable account if a successor or beneficiary is not named

This gift is: Irrevocable Revocable

This gift is stated as:

- A specific dollar amount: \$
A percentage of estate/account: % The estimated current value of this percentage is: \$
Other (i.e. gifts of tangible personal property)

NRCM will receive this gift:

- Upon my death
Upon the death of my surviving spouse/partner
Other

GIFT DESIGNATION

Restricted to one or more of NRCM's advocacy areas:

I would like my gift to support:

- General Operating Fund (unrestricted)
Permanently Restricted Endowment (min. \$100,000)
Please contact me to discuss my gift preferences

- Climate and Clean Energy
Forests and Wildlife
Healthy Waters
Sustainability

Note: Undesignated planned gifts will be applied to NRCM's Board-Directed Fund

SUPPORTING DOCUMENTS PROVIDED (only one requested)

A copy of the section of my will or trust provision pertaining to NRCM (all unaffiliated language can be redacted)

A copy of my retirement account/insurance beneficiary designation form and summary page from a recent statement

A letter from my attorney, executor, or trustee

Other: _____

DONOR RECOGNITION

I **do** **do not** authorize NRCM to to publish my name in its publications, website, or other outreach materials.

As a result of notifying NRCM of this intended gift, members are welcomed to the Wintergreen Society, the honorary society for individuals who have named NRCM in their estate plans.

I **do** wish to be an anonymous member.

ESTATE CONTACT INFORMATION

Who would you like NRCM to contact upon your death to facilitate the distribution of your gift?

Executor Trustee IRA Custodian/Plan administrator Family Member Other _____

NAME _____

COMPANY _____

ADDRESS _____
STREET CITY STATE ZIP CODE

EMAIL _____ PHONE _____

IMPACT NOTIFICATION

Who would you like us to notify at the future date when the impact of your gift has been realized?

NAME _____

REL'SHIP _____

ADDRESS _____
STREET CITY STATE ZIP CODE

EMAIL _____ PHONE _____

COMMENTS

DONOR SIGNATURE

DATE SIGNED

NRCM understands that your plans or financial circumstances may change and we do not make financial commitments in anticipation of any future estate gifts. This form is not intended to be a legally binding pledge. All information you provide will remain confidential.

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