



ALIVE! Confidential Legacy Gift Intention Statement

Thank you for your commitment to a stronger, more compassionate Alexandria.

Which of the following have you named ALIVE! as a beneficiary? (check all that apply):

- | | | |
|---|--|---|
| <input type="checkbox"/> Will or Living Trust | <input type="checkbox"/> IRA or Retirement Plan | <input type="checkbox"/> Life Insurance Policy |
| <input type="checkbox"/> Donor-Advised Fund | <input type="checkbox"/> Charitable Gift Annuity | <input type="checkbox"/> Charitable Remainder Trust |

Other (please specify): _____

In the estimated amount(s)/percentage(s) of _____
(This is optional; however, sharing the value of your legacy gift will allow ALIVE! to better plan for the future.)

It is my/our intention to support ALIVE!'s work in this way:

- ☐ Where the need is greatest ☐ To support ALIVE!'s long-term sustainability & future organizational needs

To ALIVE! focus area(s) of:

- ☐ Food Insecurity ☐ Safe & Stable Housing ☐ Emergency Financial Assistance ☐ Client Support & Advocacy

(Designated gifts will be used to support the intended program area, including indirect or long-term needs such as staffing, infrastructure, or sustainability, in alignment with ALIVE!'s mission.)

Name(s): _____

Address: _____

City, State, ZIP: _____

Phone: _____ Email: _____

Birthday(s): _____

Advisor or Attorney Name & Phone (optional): _____

If possible, please include documentation or a note from you or your advisor describing your legacy gift.

May we recognize you as a member of the ALIVE! 1969 Society Planned Giving Circle?

- | | |
|---|--|
| <input type="checkbox"/> Yes, I/we would like to be listed as 1969 Society members. | <input type="checkbox"/> I/we prefer to remain anonymous. |
| <input type="checkbox"/> I/we are open to sharing our story to inspire others | <input type="checkbox"/> I/we prefer to keep our story private |

How do you prefer to be contacted?

- ☐ Mail ☐ Email ☐ Phone ☐ No communication
☐ I'd like a team member to follow up with me

Please return the completed form via:

Mail: ALIVE! Main Office, ATTN: Development Department, 2723 King Street, Alexandria, VA 22302

Email: development@alive-inc.org

Questions?

Contact Michelle M. Lockwood, ALIVE! Development Director, at mlockwood@alive-inc.org or (703) 837-9300

This form is not a legal document and does not create a binding commitment. It is used solely for planning and recognition purposes. All information is confidential and helps ALIVE! honor and prepare for your legacy gift.