

## Madison Preservation Legacy Circle Pledge Form

I/We am/are committed to leaving a legacy beyond my/our lifetime(s) by including the Madison Trust for Historic Preservation (Madison Trust) in my/our estate plans. I/We wish to support Madison Trust in its work of advocating, educating, and celebrating the rehabilitation, restoration, and preservation of historic places in the community that cultivate a civic identity and sense of place.

<b>Gift Type</b> (While amounts are optional, they are very much appreciat	ed as a way to help Madison Trust plan for its future)			
It is our intent to leave a legacy gift to Madisor	า Trust through a:			
☐ Will or Living Trust (percentage of estate	% or specific amount \$)			
☐ IRA or Retirement Plan Beneficiary	(amount \$)			
☐ CD or Savings Account Beneficiary	(amount \$)			
☐ Life Insurance Policy Beneficiary	(amount \$)			
☐ Charitable Remainder Trust Beneficiary	(amount \$)			
☐ Publicly-traded stock or other securities	(amount \$)			
☐ Donor Advised Fund (where	) (amount \$)			
□ Other				
It is especially helpful to have a copy of the po Designation form that pertains to your gift. In a will not contact Madison Trust directly to infor your assets after your lifetime. To ensure that us to have this information on file.	many cases, IRA and other plan administrators rm us of your gift or to make a distribution of			
☐ Please check this box if you are attaching d	ocumentation for our files.			
I/We understand that my/our estates are not legally bound by this statement and I/we may choose to add, subtract, or revoke this gift at any time at my/our sole discretion.  (Note: Madison Trust kindly requests notification any time you make changes or adjustments to your gift.)				
(INOTE: Madison Trust kindly requests notification any tir	ne you make changes or adjustments to your gift.)			

V.2023.02.02 1

(Continued)

Gift Designation				
This gift is unrestricted and may be us	ed for the greatest r	need at MTH	P.	
This gift is restricted for this specific p	urpose:			
<ul><li>□ Advocacy</li><li>□ Education</li><li>□ Organizational Development</li></ul>	Educational Tours & Events elopment    Outreach & Engagement			
Acknowledgement				
☐ I/We agree to have my/our names published others to leave legacy gifts to benefit Madison be published and remains confidential.)	<b>.</b>			
Name(s)				
Address				
Street	City	State	ZIP	
Telephone Email _				
☐ I/we wish to remain anonymous.				
Donor Signature	Donor Signature			
Date	Date			
Please email this form to <a href="mailto:info@madisonpreserv">info@madisonpreserv</a> Madison Trust for Historic Preservation PO Box 296 Madison WI 53701-0296	<u>vation.org</u> or send b	y mail to:		

For more information call 608-441-8864 or email info@madisonpreservation.org.

To complete and submit this form online, go to <u>madisonpreservation.org/preservation-legacy-circle.</u>

Share a copy of this form with your financial advisor or estate planning attorney.

The Madison Trust for Historic Preservation, a charitable organization under Section 501 (c)(3) of the Internal Revenue Code, is exempt from federal income taxation. The tax identification number of Madison Trust is 23-7356105.

V.2023.02.02 2