Intent to give: Letter to an executor to name Vanguard Charitable as beneficiary

Use this form to notify the executor of your will or a designated attorney of your intention to gift a portion of your estate's assets into a philanthropic account. Gifts may be a bequest from your will, IRA, 401(k), or other retirement plan, trust, or insurance policy.

Deferred gifts require planning and careful execution. To ensure your assets are gifted to Vanguard Charitable, we recommend following two steps.

- 1. When planning your estate, include in writing your intention to gift a portion of your estate's assets to Vanguard Charitable.
- 2. Alert Vanguard Charitable to your intentions by submitting a copy of this document. To finalize the intended gift upon your death, the estate must initiate the contribution of assets into a new or existing philanthropic account and complete all required paperwork.

This form is not legally binding and can be amended, changed, or disregarded at any time. Seek the guidance of an advisor when planning your estate or amending estate plans.



Contact us with questions or special requests

888-383-4483 donorservice@vanguardcharitable.org

Return	inform	mation
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Retain this document and share with appropriate family members, advisors, and nonprofit organizations. Please also send a copy of this document to Vanguard Charitable.

Email:

Fax:

Mail:

donorservice@vanguardcharitable.org We recommend encrypting the form and sharing the password separately.

866-485-9414

P.O. Box 9509 Warwick, RI 02889-9509

A letter to the executor of my estate:

I bequeath the amount and/or property and/or percent of my residuary estate described in **Section 2** to Vanguard Charitable (EIN 23-2888152), a nonprofit organization located in Malvern, Pennsylvania.

1 Donor information

Identify all current registered owners of the assets to be donated.

	Individuals	Estate of individuals	Trus	t or orga	nization
If you selected Trust or					
organization, complete hese fields.	Taxpayer Identification Number		Trust agreement date mm-dd-yyyy		
	Owner/Trustee/Office	r A			
Gender Name salutation, first, middle initial, last Male Female					
Title at organization					
	Birth date mm-dd-yyyy	Last 4 digits of SSN or PIN	Preferre	ed phone	
Street address or P.O. box number					
	City			State	Zip
	Email address				

Owner/Trustee/Officer B

Gender Male Female	Name salutation, first, middle initial, last			
Title at organization				
Birth date mm-dd-yyyy	irth date mm-dd-yyyy Last 4 digits of SSN or PIN Preferred phone			
Street address or P.O. box number				
City		State	Zip	
Email address				

2 Contribution information

The minimum initial contribution is \$25,000, and the minimum additional contribution is \$5,000.

	Gift type
	Bequest under a will or codicil
	Distribution from an insurance policy
Check all boxes that apply to the assets you	Distribution from an IRA, 401(k), or other retirement plan Remember to name Vanguard Charitable as the account beneficiary.
wish to contribute.	Distribution from a trust
	Other please specify
	Estimated donation
	Dollar amount
	Amount: \$
Select one option.	Percentage of estate
	Percentage: %
	Estimated dollar amount: \$
	Description of property or assets

Custodian/firm

Name of custodian/firm			
Street address or P.O. box number			
City		State	Zip
Preferred phone	Firm account number		
Contact name if available			

3 Account information

Choose which account will receive the contributed assets.

New account with name		
Proposed account name: The	Fund	
New account without name		
Advisors will name the account once an initial gift is made.		
Existing account		
Account number:		
Account name: <i>The</i>	Fund	

4 Account activity

The more information you include in your plans, the more effectively your executor can implement your requests. Consider detailing the following information. If you require extra space, include additional sheets.

If selected, name account advisors below.

Nominate a maximum of two account advisors. Advisors have ongoing account privileges and access to recommend grants, select investment options, and revise the succession plan.
Recommend an Endowed Grant Plan. Complete and return a <i>Recommend an Endowed Grant Plan</i> form.
Select investment options and asset allocation.
Suggest granting patterns. For example, recommend grants to a specific favorite charity.

Account advisor A

Name salutation, first, mi	iddle initial, last	Last 4 digits of SSN or PIN	
Birth date mm-dd-yyyy	Relationship to current advisor(s)		
Preferred contact information mail, email, or phone			

Account advisor B

Name salutation, first, middle initial, last		Last 4 digits of SSN or PIN	
Birth date mm-dd-yyyy	Relationship to current advisor(s)		
Preferred contact informa	ation mail, email, or phone		