

**CONFIDENTIAL STATEMENT OF INTENT**

I/we have made a provision for Horizons Foundation in my/our estate plan as a way of ensuring the future strength of the LGBT community.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

**Description of the gift:**

- Bequest in will or trust
- Beneficiary of life insurance policy
- Beneficiary of retirement plan
- Charitable trust agreement
- Other (please describe on opposite side)
- The gift is subject to conditions (please describe on opposite side) (optional)

**Optional, but helpful to Horizons Foundation:**

- Attached is a copy of the portion of the will, trust, or document pertinent to this gift
- The approximate anticipated value of this gift is \$\_\_\_\_\_.

**Publication and communication**

Horizons Foundation periodically publishes a list of Legacy Circle members unless members request to remain anonymous. Publishing your intention encourages others, by means of your example, to make similar gifts. All details about type or amount of each member’s intention will remain confidential.

- Please list my/our name(s) as: \_\_\_\_\_
- Please do not publish my/our name(s) in connection with Horizons Foundation’s Legacy Circle
- Please send me only communications specifically for the Legacy Circle (i.e., no general newsletter, etc.)
- Please send me only the foundation’s annual report each year

**This statement of intent does not constitute a legally binding pledge or agreement for me or for my estate. It documents only my intent, and may be amended at any time.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return this form to:**

Deb Stallings, Director of Development and Gift Planning  
Horizons Foundation  
550 Montgomery Street, Suite 700  
San Francisco, CA 94111

Phone 415.398.2333 x103  
Fax 415.398.4733  
Email dstallings@horizonsfoundation.org