



**MY POSSIBILITIES**  
LEARN LIVE GROW

GIFT PLANNING

**DECLARATION OF FUTURE INTENT**

MYPOSSIBILITIES.ORG/GIFTPLANNING

Thank you for your intention to include My Possibilities in your estate plan. In order to accurately document your intention, please complete this form with as much detail as you are willing to share. Any information about your gift will remain confidential and does not create a binding obligation.

**Recognition of Your Gift**

- For recognition purposes, please list my/our name(s) as follows:  
\_\_\_\_\_
- Please do not include my/our name in any public listings of donors.
- I/We wish for my/our gift intention to be confidential and anonymous, publicly and in My Possibilities records.
- Gift Agreement/Letter** - I/We have signed a Gift or Letter Agreement with My Possibilities for this gift and have made no changes to the designation or purpose.
- No Gift Agreement/Letter** – Briefly describe allocation, designation, and how your gift should be used.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Description and Value of Gift** - Please indicate below (by checking applicable options), how your future gift intention will be fulfilled and provide the estimated value for My Possibilities:

<u>Description</u>	<u>Amount or Percentage</u>	<u>Estimated Amount of Gift to My Possibilities</u>
<input type="checkbox"/> <b>Will or Trust</b> with a sum of _____		
<input type="checkbox"/> <b>Charitable Gift Annuity</b> in the amount of _____		
<input type="checkbox"/> <b>Charitable Remainder Trust</b> in the amount of _____		
<input type="checkbox"/> <b>Remainder of Retirement Fund/IRA</b> with a total current value of _____	-	_____
<input type="checkbox"/> <b>Life Insurance Policy</b> with a policy value at maturity of _____	-	_____
<input type="checkbox"/> <b>Other Item or Asset</b> in the amount of _____ <b>Please describe</b> (for example, private collections, real estate, securities, etc.): _____	-	_____

- Beneficiary** – If My Possibilities is only a contingent beneficiary, please explain conditions.  
\_\_\_\_\_
- Documentation** - Please provide us with copies of any documents (or the relevant pages) that include provisions for My Possibilities.

**Please Complete Reverse Side**

**Contact Information**

**Will or Trust** – If your gift is included in a will or trust, please provide the following:

**Executor(s) or Trustee(s)**

Name and Address

Phone and/or Email

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Beneficiary Designation** – If your gift is directed by a beneficiary designation, please provide the following:

**Administrator or Company**

Name and Address

Phone and/or Email

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Information, Contacts and Relationships You Want Us to Know (family, attorney, etc.)**

Name and Address

Phone and/or Email and Relationship

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This Declaration of Intent** enrolls you in the MP Legacy Society. You will be contacted regarding your participation.

- New Intention** – This is a new bequest intention to My Possibilities.
- Update to Intention** – This is an update to a previously recorded bequest intention to My Possibilities

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Email and Phone Number

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Email and Phone Number

**Please send this form** (together with copies of any relevant documents) to the Department of Resource Development, My Possibilities Mapleshade Lane, Plano TX 75075. Please contact us if you have any questions or concerns at the number below.

Jeanine Alpert, Director of Community Engagement at 469-998-3580 or [jdalpert@mptx.org](mailto:jdalpert@mptx.org)