



WOMEN FOR A HEALTHY ENVIRONMENT LEGACY GIVING

By supporting Women for a Healthy Environment, your impact will benefit families for generations. Legacy gifts provide healthy spaces for children to thrive and ensure long-term funding that lasts beyond your lifetime, without any financial burden on you or your loved ones. These gifts are tax-exempt, potentially reducing your heirs' tax obligations.

There are many ways to contribute through planned giving. Explore options with your financial advisor to find the best fit for you and unlock potential tax benefits.

Planned Giving Options:

- **Bequests:** Name WHE as a beneficiary in your will or trust.
- **Life Insurance Policies:** Make WHE the owner and beneficiary of a new or existing policy.
- **Retirement Assets:** Satisfy your required minimum distribution (RMD) by making a tax-free Qualified Charitable Distribution (QCD) from your IRA directly to WHE. Individuals aged 70½+ can donate up to \$105,000 (\$110,000 for married couples).

If you've already made a legacy gift, thank you! Please complete the Legacy Gift Intention Form (see next page) to help us understand your goals and keep you connected to your gift's impact.

Please consult your legal or tax advisor for personalized guidance.

Contact Kesa Ahomana, Director of Development
kesa@whepa.org



WOMEN FOR A HEALTHY ENVIRONMENT LEGACY GIFT INTENTION FORM

Thank you for considering a legacy gift to support Women for a Healthy Environment. Please complete the form below to share details of your planned gift and help us ensure your wishes are honored.

DONOR INFORMATION

Full Name: _____

Address: _____

Phone Number: _____

Email Address: _____

GIFT DETAILS

I have included Women for a Healthy Environment in my (select all that apply):

- ☐ Will
- ☐ Trust
- ☐ Retirement Plan (IRA, 401(k), etc.)
- ☐ Life Insurance Policy
- ☐ Other: _____

Estimated Value of the Gift (optional): \$ _____

RECOGNITION PREFERENCES

- ☐ I would like my gift to remain anonymous.
- ☐ You may recognize me publicly for my gift.

EXECUTOR/ATTORNEY INFORMATION (OPTIONAL)

Name: _____

Phone Number: _____

SIGNATURE

I confirm that I have included Women for a Healthy Environment in my estate plans as described above.

Signature: _____

Date: _____

Email to Kesa Ahomana, Director of Development
kesa@whepa.org

