

Legacy Circle

The Venice Symphony Legacy Circle recognizes and honors visionary individuals, couples and families who include the Symphony in their estate plans. Your commitment ensures our shared mission to transform lives through music continues. With your sustaining support, future generations will experience inspiring music, meaningful programs and artistic excellence.

NAME: _____ TODAY'S DATE: _____

STREET ADDRESS: _____

CITY, STATE, ZIPCODE: _____

PHONE: _____ EMAIL: _____

☐ **I am/We are pleased to join The Venice Symphony Legacy Circle (check all that apply):**

- ☐ I/We wish to name The Venice Symphony in my/our will or trust as a beneficiary. Please contact me/us with instructions.
- ☐ I/We have already named The Venice Symphony in my/our will or trust. Our attorney or advisor will provide the Symphony with a copy of the appropriate portion of our will or trust.
- ☐ I/We have named The Venice Symphony as a beneficiary of a life insurance policy.
- ☐ I/We have named The Venice Symphony as a beneficiary of one or more Individual Retirement Accounts (IRAs).
- ☐ I/We have established a life income plan with The Venice Symphony.
- ☐ I/We have made other estate provisions for The Venice Symphony as described below:

- ☐ Please include my/our name(s) on The Venice Symphony Legacy Circle membership list in Symphony publications. My/our listing should appear as follows: _____
- ☐ I/We wish to remain Anonymous. Do not include my/our names in the Legacy Circle.
- ☐ Current or approximate value of estate gift \$ _____ (Held in strict confidence)

For further information, please contact Holly Anderson, Vice President of Philanthropy, 941-303-5738 or handerson@thevenicesymphony.org

Thank you for your thoughtful support!

Sample Language

For a Will:

I gift, devise and bequest \$ _____ (or a percentage of my estate or the rest, residue and remainder of my assets) to The Venice Symphony a 501 ©(3) tax exempt corporation organized and existing under the laws of the State of Florida and having an office in Venice, Florida to establish and fund the (Name of Charitable Fund) for their general charitable purposes.

For a Trust:

SAMPLE I: The Trustee shall distribute \$ _____ (or a percentage of the trust assets or the rest, residue and remainder of trust assets) to The Venice Symphony a 501 © (3) tax exempt corporation organized and existing under the laws of the State of Florida and having an office in Venice, Florida to establish and fund the (Name of Charitable Fund) for their general charitable purposes.

SAMPLE II: Then all of the remaining income and principal of the trust shall be distributed to The Venice Symphony, a 501 © (3) tax exempt corporation organized under the laws of the State of Florida whose address is 700 US Hwy 41 Bypass North, Suite 4, Venice, Florida 34285 and whose Tax Identification Number is 59-1710244 for their general charitable purposes.

The Venice Symphony's Tax Identification Number is 59-1710244

The Venice Symphony

700 US Hwy 41 Bypass North, Suite 4
Venice, Florida 34285

(941) 207-8822