



A passion for healing. A love of giving.

POMONA VALLEY HOSPITAL
MEDICAL CENTER FOUNDATION
1798 N. Garey Avenue
Pomona, CA 91767

JAMES DALE
Vice President of Development
Phone: (909) 469-9408
Fax: (909) 622-3988
legacy@pvhmc.org

Advisor's Guide for Planned Giving

GIFTS FROM WILLS AND TRUSTS:

When making a charitable gift to a nonprofit organization, it is vital the legal name of the charity, city and other identifying details be used. To name Pomona Valley Hospital Medical Center Foundation in your will or trust please use the following suggested language:

RESIDUAL GIFT LANGUAGE:

A residual bequest comes to us after your estate expenses and specific bequests are paid:

I give and devise to Pomona Valley Hospital Medical Center Foundation, located in Pomona, CA, all (or state a percentage) of the rest, residue, and remainder of my estate, both real and personal, to be used for its general support (or for the support of a specific fund or program).

SPECIFIC GIFT LANGUAGE:

Naming Pomona Valley Hospital Medical Center Foundation as a beneficiary of a specific amount from your estate is easy:

I give and devise to Pomona Valley Hospital Medical Center Foundation, located in Pomona, CA, the sum of \$ _____ (or asset) to be used for its general support (or for the support of a specific fund or program).

CONTINGENT GIFT LANGUAGE:

Pomona Valley Hospital Medical Center Foundation or its affiliates can be named as a contingent beneficiary in your will or personal trust if one or more of your specific bequests cannot be fulfilled:

If (insert name) is not living at the time of my demise, I give and devise to Pomona Valley Hospital Medical Center Foundation, located in Pomona, CA, the sum of \$ _____ (or all or a percentage of the residue of my estate) to be used for its general support (or for the support of a specific fund or program).

GIFTS OF APPRECIATED SECURITIES:

Legal Name: Pomona Valley Hospital Medical Center Foundation

Tax I.D. Number: 95-3403287

DTC Number: 418

Incorporated In: Pomona, CA

Please contact James Dale for a stock transfer form.

BENEFICIARY GIFTS FROM RETIREMENT PLANS, LIFE INSURANCE, BROKERAGE ACCOUNTS OR ANY OTHER PLAN WITH A BENEFICIARY DESIGNATION:

Please contact your plan provider for a change of beneficiary form. Once you have filled out the form, please send a copy to James Dale, Vice President of Development.

Legal Name: Pomona Valley Hospital Medical Center Foundation

Tax I.D. Number: 95-3403287

Incorporated In: Pomona, CA

NOTE TO ATTORNEYS, ACCOUNTANTS AND OTHER PROFESSIONAL ADVISORS:

Thank you for helping your client with their charitable planning. As a professional advisor, you build your client relationships on trust and mutual respect. The same is true for our relationships with our friends and donors.

We understand that financial, philanthropic and estate goals are unique to the individual. For this reason we welcome the opportunity to assist as you incorporate your clients' philanthropic objectives into well-crafted estate plans. Furthermore, we encourage prospective donors to consult with their professional advisors before making decisions based on information we provide.

If you have any questions or concerns, please call contact James Dale, Vice President of Development at 909-469-9408 or legacy@pvhmc.org