

ST. LOUIS LEGACY ICE FOUNDATION – DONATION/PLEDGE FORM
 Join the St. Louis Legacy Ice Foundation's effort to develop the St. Louis Community Ice Center.
 The Foundation is a 501c3 organization; all gifts are tax deductible to the extent allowable by law.



DONOR INFORMATION (please type or print)

NAME(S): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL: _____ PHONE: _____

MISSOURI TAX CREDIT OPPORTUNITY:

The Legacy Ice Foundation is approved to participate in the Missouri Development Finance Board Tax Credit program. Open to any person or organization with a Missouri tax liability (who is willing to contribute at least \$500 to help develop the St. Louis Community Ice Center), these tax credits can help you reduce your liability by 50% of your total contribution.

If you are interested in MDFB credits, email (pq@legacyice.org) or call (314.619.9929) for additional information **prior** to sending in this form or a donation. Donations must be received by the MDFB (not the Legacy Ice Foundation); we will be happy to assist you in completing this easy process.

DONATION INFORMATION: Today's donation: \$_____

- My contribution will be made directly to the MDFB so I/we can receive tax credits
 Confirm with us that credits are still available before selecting this option. We will provide you details to direct your gift to the St. Louis Community Ice Center project via MDFB (MDFB contributions cannot be made via credit card).
- Check payable to St. Louis Legacy Ice Foundation
- MasterCard Visa # _____ Exp ____/____
- Discover AMEX CVC _____
- Increase my gift by 2.5% to assist with card processing fees.

FUTURE PLEDGE INFORMATION complete if making a pledge instead of/in addition to a gift today

I/We wish to pledge the following amount(s) to be paid in the future:	2018: \$ _____
	2019: \$ _____
	2020: \$ _____

*Automatic payment reminders will be scheduled for December 1.

By this pledge, I/we are making a legally binding commitment to donate the amount(s) indicated above for the development of the St. Louis Community Ice Center. As a result of and in reliance upon this pledge, the St. Louis Legacy Ice Foundation will solicit other donations and pledges and arrange for and construct the Ice Center. This pledge shall be governed by and interpreted under the laws of the State of Missouri. Donations are tax-deductible to the extent allowed by law.

DONOR SIGNATURE #1: _____ DATE: _____

DONOR SIGNATURE #2 (or N/A): _____ DATE: _____

RECOGNITION: Donors will be recognized in building campaign materials unless anonymity is preferred. Donors meeting the following contribution levels can receive additional recognition:

- \$2,500+ donors will be included in our permanent plaque
- \$25,000+ donors can select from an array of multi-year/permanent naming opportunities

Please use the following name(s) in all acknowledgements: _____.

- Contact me to discuss naming opportunities.
- I (we) wish to remain anonymous.



Patrick M. Quinn
Chairman
PQ@legacyice.org
314.619.9929

www.legacyice.org

Instructions To Make A “Tax Credit Eligible” Donation Via Check Or Wire Transfer

1. Complete the **FORM 100** from the Missouri Finance Development Board which has been provided to you by Legacy Ice Foundation.
2. If you choose to send a check, make the check payable to **MISSOURI DEVELOPMENT FINANCE BOARD** and on the memo line please write **FBO: STL Legacy Ice Foundation Project**

3. If you choose to send funds via wire transfer, the instructions are as follows:

Bank: Central Bank
P.O. Box 779
Jefferson City, Missouri 65102

Routing Code: 086500634

Account Name: Missouri Development Finance Board Tax Credit Account

Account Number: 00-7629-5

Reference: FBO St. Louis Legacy Ice Foundation Project

If you have any questions regarding this information or problems with your transfer, please contact Erica Griffin, Controller - Missouri Development Finance Board at 573-751-8479.

4. Send the completed **FORM 100** + your check (or a copy of the wire transfer verification email/letter you receive from your bank) to:

<u>Mailing Address</u>	<u>UPS or FedEx Overnight Address</u>
Missouri Development Finance Board P.O. Box 567 Jefferson City, MO 65102	Missouri Development Finance Board 200 Madison Street, Suite 1000 Jefferson City, MO 65101

5. Please contact Patrick Quinn @ 314-619-9929 or pq@legacyice.org if you wish to make a contribution using marketable securities.



Missouri Development Finance Board
VERIFICATION OF CONTRIBUTION TO THE
INFRASTRUCTURE DEVELOPMENT FUND

MISSOURI FORM

100

RSMo. Section 100.286.6

A Missouri Form 100 must be used when making a contribution to an approved project. Contributions can be in the form of a check, wire transfer, or marketable securities. Checks must be payable to the "Missouri Development Finance Board" and not to the project title. Application must be approved prior to due date of tax return. If more than one individual is listed as the Contributor, the Social Security Number and signature of all individuals must be included.

CONTRIBUTOR / CONTRIBUTION

Individual's Name(s) or Name of Business Making the Contribution			
Attention:		Title	
Address		City	State ZIP Code
Federal ID No. (FEIN)	Missouri Tax ID No.	Social Security Number(s)	
Telephone Number	Fax Number	E-mail	
Amount of the Contribution <small>(In the case of marketable securities, the amount of contribution equals the net liquidated proceeds.)</small>	Date the Contribution was Made	Project Name	
\$		St. Louis Legacy Ice Foundation Project in partnership with the City Of Maryland Heights, MO	
Issued for Calendar Year	or Tax Year Beginning		Ending

TAXPAYER TYPE (check one)

<input type="checkbox"/> Corporation	<input type="checkbox"/> Fiduciary	<input type="checkbox"/> Individual Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> S-Corporation	<input type="checkbox"/> Individual
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If the taxpayer is a Fiduciary, Partnership, or S-Corporation, or other entity with a flow through tax treatment, identify the names, Social Security Numbers, and proportionate share of ownership of each beneficiary, partner, or shareholder. The aggregate proportionate shares or percent of total ownership may not exceed 100%. Attached a separate sheet if necessary.

Name(s)	Social Security Number(s)	% Ownership Year End
		%
		%
		%
		%

VERIFICATION OF CONTRIBUTION

- I certify that I am an authorized representative of the Contributor and as such am authorized to make the statement of affirmation contained herein.
- I certify under penalties of perjury, that a contribution was made to the Infrastructure Development Fund by the subject taxpayer on the date and in the amount indicated above.

Signature(s) of Contributor	Date
	

TO BE COMPLETED BY THE MISSOURI DEVELOPMENT FINANCE BOARD

Signature of Missouri Development Finance Board Representative	Date

RETURN COMPLETED FORM TO:	Mailing Address	UPS or Fed-Ex Overnight Address
	Missouri Development Finance Board P.O. Box 567 Jefferson City, Missouri 65102	Missouri Development Finance Board 200 Madison Street, Suite 1000 Jefferson City, Missouri 65101