



Legacy Gift Intention Form

PERSONAL INFORMATION

Name: _____ Birthdate: _____

Name: _____ Birthdate: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

GIFT DESCRIPTION

I/We have named the University of Missouri–St. Louis as a beneficiary of my/our:

Will/Living Trust Charitable Remainder Trust Retirement Assets Life Insurance Policy Charitable Gift Annuity

Other (please explain) _____

Brief description of the gift to UMSL (percentage of estate, specific amount, description of property, etc.)

This is a contingent gift, meaning that UMSL is an alternate beneficiary and will only receive the gift under certain circumstances. Please describe any contingent arrangements:

As of today's date, I/we estimate the value of this provision in my estate plans to be \$ _____

PURPOSE OF YOUR GIFT

The university wants to understand the "why" behind your legacy gift. If you don't mind, please share with us the reason you want to make such a meaningful gift to the UMSL.

Unrestricted Restricted for the following purpose or program
(Please consult with the Advancement Office on designations as UMSL wants to document and accurately honor your intentions.)



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GIFT DOCUMENTATION

I/We understand that this is not a legal or binding commitment on my/our estate. UMSL should understand that the size of this future gift may be significantly different from the amount estimated above. If for any reason in the future, UMSL is no longer included in my/our estate plans, I/we will notify the University, to update records. I/We understand that any gift received by UMSL from my/our estate shall be subject to UMSL fee assessment policies in effect at the time.

Signature / Date:

Signature / Date:

Attached is a copy of the relevant portions of the legal documents relating to my/our future gift to UMSL and/or a letter from my legal or financial advisor that describes the nature and purpose of the gift (*optional*)

Attorney/Person Handling Estate (*optional*):

Address:

Phone:

Email:

GIFT RECOGNITION

I/We understand that membership is based upon information provided about my/our future gift to UMSL. I am/We are pleased to accept membership in the 1963 Society, which honors those who have included UMSL in their long-term financial and estate plans.

Going forward, please recognize me/us as:

EXAMPLES: John and Betsy Smith, Mr. and Mrs. John H. Smith, Mrs. Elizabeth Smith, John Doe and Elizabeth Smith.

Thank you for sharing details regarding your long-term financial plans. Information disclosed will be kept strictly confidential. This is not a legally binding document but helps us understand your wishes for the future.

Please return this completed form to:

UMSL Advancement
Elizabeth Niven, Planned Giving
1 University Blvd
440 Woods Hall
St. Louis, MO 63121

Questions about the 1963 Society or legacy gift intentions?

Contact **Elizabeth Niven**, senior director of planned giving
314-516-6788 or eniven@umsl.edu