

LEAVING A LEGACY

Thank you for including the University of St. Thomas in your estate plan. This form is designed to document your future gift and ensure that we have a clear understanding of your intentions. Please complete this form with as much detail as you are willing to share. This form does not create a legally binding obligation. All details about your gift will remain confidential.



Name _____

Birth Date _____

Name _____

Birth Date _____

- This is my first gift to the University of St. Thomas.
- I am already a member of the Finn Legacy Society. This gift is:
 - in addition to an existing planned gift.
 - an update to my existing planned gift.

PURPOSE OF FUTURE GIFT

It is my/our desire that this gift be used in the following manner:

- This gift is unrestricted and may be used where the need is greatest at the University of St. Thomas.
- I/We wish to specify that my/our gift be used for the following purpose(s):

DESCRIPTION AND VALUE OF GIFT

Please indicate below (by checking applicable options) how your future gift intention will be fulfilled, and provide the estimated value for the University of St. Thomas:

Description

Estimated Amount of Gift to the University of St. Thomas

- | | |
|--|----------|
| <input type="checkbox"/> Will or Trust* | \$ _____ |
| <input type="checkbox"/> Beneficiary of Retirement Account/Whole Life Insurance Policy* | \$ _____ |
| <input type="checkbox"/> (65+ years) Term Life Insurance Policy | \$ _____ |
| <input type="checkbox"/> Charitable Gift Annuity | \$ _____ |
| <input type="checkbox"/> Charitable Remainder Trust | \$ _____ |
| <input type="checkbox"/> Donor-Advised Fund | \$ _____ |
| <input type="checkbox"/> Other Item or Asset | \$ _____ |

Please describe (for example, private collections, real estate, securities, etc.): _____

***Contingent or Partial Heir/Beneficiary** - If the University of St. Thomas is a contingent or partial heir/beneficiary, please provide details/percentage.

WELCOME TO THE UNIVERSITY OF ST. THOMAS LEGACY SOCIETY

Thank you for this transformational gift to the university! Members of the Legacy Society leave a lasting and indelible mark on the university, demonstrating an unwavering commitment to the mission and vision of St. Thomas. The Legacy Society was established to recognize supporters who have thoughtfully and generously included gifts to the University of St. Thomas in their estate plans.

Your legacy will be an inspiration to others. St. Thomas maintains an honor roll of the names of Legacy Society members, encouraging others to consider their own potential to create opportunities for future Tommies.

DONOR SIGNATURE _____

DATE _____

DONOR SIGNATURE _____

DATE _____

DONOR CONFIDENTIALITY REQUEST (optional)

I/We, _____, have made a planned gift commitment to the University of St. Thomas and hereby request that my/our identity not be disclosed by the university to the general public, unless disclosure is required by law. I/We understand that I/we may withdraw this request, and make my/our name(s) public, at any time by notifying the university.

My/Our identity should be kept confidential after my/our death(s).

Please return this form to your St. Thomas University Advancement staff contact or the Office of Legacy and Estate Gifts.

Office of Legacy and Estate Gifts
2115 Summit Ave., Mail DEV
St. Paul, MN 55105
Phone: 651-962-6943
Email: legacygiving@stthomas.edu
Website: link.stthomas.edu/legacygiving



**THANK YOU FOR CREATING A LEGACY WITH
THE UNIVERSITY OF ST. THOMAS!**