Bequest Intention Form for Gift Credit

Name(s)_________________________________________________________________________________________________________Class Year (or date of birth)

In appreciation of Wellesley College and with the desire to contribute to its continued strength and success, I/we have executed and, barring unanticipated changes in circumstances, intend to keep in effect a valid provision in my/our estate for the College. I understand that I am eligible for gift credit for my bequest intention because I have celebrated my 50th reunion or I will celebrate my 50th reunion in the next 5 years. (Age 72 and older also receive gift credit for documented bequest intentions.)

A conservative estimate of the current value of my/our bequest is $__________________________
($10,000 minimum)

Description of type of provision: e.g., specific dollar amount, percentage of estate/property, description of gift property, etc.
________________________________________________________________________________________________________________________________________________________

My/our bequest intention is made through the following:

WILL

☐ Bequest in a will

TRUST

☐ Gift in a living trust

☐ Charitable remainder trust

☐ Charitable lead trust

OTHER

☐ Retirement plan assets [e.g., IRA, 401(k), 403(b)]

☐ Life Insurance

☐ Other ____________________________

☐ Attached is a copy of the relevant document naming Wellesley College as a primary beneficiary: e.g., pages of will or trust referencing Wellesley College, beneficiary designation form from life insurance or retirement plan.

I/we wish for this gift to be anonymous, such that our names will never be published by the College in connection with bequests:  YES ☐

I/we understand that Wellesley College will consider this commitment and may use this information to plan for its educational program on the basis of this provision. If my intentions change, I/we will inform the College.

________________________________________________________________________________________________________________________________________________________

Signature ____________________________________________ Date __________________

Signature ____________________________________________ Date __________________

Please return this form and relevant documents to:
Office of Gift Planning
106 Central Street
Wellesley, MA 02481

For more information, please contact us at 800-358-3543 or giftplanning@wellesley.edu 11/15/2017