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|  | **HERITAGE SOCIETY—CONFIDENTIAL BEQUEST STATEMENT**We are pleased to welcome you to the ACPA Heritage Society. Membership in this group is open to those who have made a gift to the ACPA Foundation through their estate plan. Please take a moment to fill out the information below for our records. The specifics of your gift will remain confidential. RETURN THE COMPLETED DOCUMENT TO: SUE SAUNDERS, ACPA PLANNED GIVING COORDINATOR, 116 HOLMAN ROAD, WILLIAMSBURG VA 23185 |

1. **GENERAL INFORMATION**

Name(s) *as you would like to be listed on Heritage Society Documents*:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year(s) of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(You will receive occasional emails from the ACPA Foundation. We will not sell, rent, or exchange your email address.)

1. **TYPE OF PLANNED GIFT** (Please check all that apply. Note that we do not accept gifts of real estate or other tangible assets.)

 \_\_\_\_\_ BEQUEST (Will)

 \_\_\_\_\_ RETIREMENT ACCOUNT

 \_\_\_\_\_ LIFE INSURANCE BENEFICIARY DESIGNATION

 \_\_\_\_\_ OTHER TYPE OF GIFT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_ THIS GIFT IS CONTINGENT, BASED ON OTHER INDIVIDUAL(S) TO PASS AWAY

1. **ESTIMATED VALUE OF GIFT** (This information is useful for our long-term planning purposes. Disclosure of an estimated amount does not constitute a binding obligation).

GIFT TO ACPA FOUNDATION: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IS THIS GENEROUS GIFT A

\_\_\_\_\_\_ Specific dollar amount? **OR** \_\_\_\_\_ A percentage of your estate?

1. **ULTIMATE USE OF YOUR GIFT BY THE ACPA FOUNDATION** (Please check all that apply)

\_\_\_\_\_ UNRESTRICTED (To be used for the highest priorities as determined by the ACPA Foundation Board)

\_\_\_\_\_ RESTRICTED FOR THE FOLLOWING PURPOSE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ ENCLOSED IS A COPY OF THE RELEVANT SECTION OF MY WILL/TRUST/BENEFICIARY DESIGNATION

1. **SIGNATURE(s)**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Initial below if you prefer to remain completely anonymous for this gift.

\_\_\_\_\_\_\_\_\_

1. **FURTHER INFORMATION**

 *The ACPA Foundation cannot render tax or legal advice, and the information requested on this statement of intention is not intended as such. Because of the complexity of estate planning, it is important that you confer with a qualified advisor to assess the legal, financial and tax benefits for your personal situation. We will be happy to answer any questions you may have about this material. To send this form or raise more questions, please contact Dr. Sue Saunders, Planned Giving Coordinator, 860-428-8721,* *sue.saunders1950@gmail.com**, 116 Holman Road, Williamsburg, VA 23185.*