



## Bequest Intention Form

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**Welcome to The Heritage Society. The Heritage Society recognizes all those who have included Immaculata University in their long-term plans through a bequest provision in their Will or trust, a life-income gift, or other deferred gift.**

Name(s) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
(please print)

Name(s) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
(please print)

I/We have included Immaculata University in my/our will.

A specific bequest of \$\_\_\_\_\_

A percentage bequest of \_\_\_\_\_%. Estimated value \$\_\_\_\_\_

Other (describe):  
\_\_\_\_\_  
\_\_\_\_\_

I/We have made arrangements for the following:

**A life insurance policy.**

Death benefit \$\_\_\_\_\_ Current cash surrender value \$\_\_\_\_\_

The University is  Primary beneficiary  Secondary beneficiary (please check one)

**A Qualified Retirement Plan (IRA, 401k, 403b)**

University interest \_\_\_\_\_% Current market value of plan \$\_\_\_\_\_

The University is  Primary beneficiary  Secondary beneficiary (please check one)

**Charitable Remainder Unitrust or Annuity Trust**

University interest \_\_\_\_\_% Current market value of trust \$\_\_\_\_\_

**Testamentary Charitable Lead Trust**

University interest \_\_\_\_\_% Expected payout \$\_\_\_\_\_

*See reverse side*



**PURPOSE**

My/Our future gift is restricted for the following purpose:

- General Endowment
- General Scholarship Endowment
- Named Endowment for the following purpose:

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**Note:** Immaculata University will prepare an endowment agreement for your review.  
The agreement will ensure that you wishes are met.

Other \_\_\_\_\_

**SUGGESTED ENDOWMENT LANGUAGE FOR YOUR WILL**

I give \$\_\_\_\_\_ Dollars to Immaculata University, located in Immaculata, Pennsylvania, to be added to the University's permanent endowment with the income only therefrom to be used for the general purposes of the University.

**DOCUMENTATION**

- Yes, I/we will share a copy of the portion of the will that applies to Immaculata University or the trust agreement or Change of Beneficiary Form (401k, 403b, IRAs, Insurance) in which the University is named.

**AUTHORIZATION FOR USE OF NAME**

- I/We authorize Immaculata University to include my/our name(s) on the membership list of The Heritage Society in publications and on public recognition displays. I/We understand that this authorization is limited to the use of my/our name(s) only, and that the type and amount of my/our gift to Immaculata University will remain confidential.
- I prefer to remain an anonymous member of The Heritage Society.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_