

Amherst College Bequest Recognition Form

(Confidential)

Name(s)	Class Year	Date

In appreciation of Amherst College and with the desire to contribute to its continued strength and success, I/we have executed and intend to keep in effect a provision in my/our estate plan for the College.

A conservative estimate of the current value of my/our provision is \$

Please attach a copy of the relevant document naming Amherst College as a primary beneficiary* For example, the portion of your will or trust mentioning Amherst College, or the part of the beneficiary form from your life insurance or retirement plan. All bequest documentation will be kept in strictest confidence.

My/our provision is made through the following planned gift:

BEQUEST

 \Box Bequest in a will

OTHER

- □ Retirement plan assets [e.g., IRA, 401(k), 403(b)]
- □ Life Insurance
- □ Other_____

TRUST

- □ Bequest in a living trust
- □ Charitable remainder trust
- □ Charitable lead trust

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*Amherst is a primary beneficiary if the bequest occurs regardless of the order of deaths. For example, "\$10,000 to Trustees of Amherst College, and the remainder to my spouse." Please contact us if you have any questions on whether your bequest is primary or contingent.

Date

On occasion, names of donors who have documented bequests may be listed in College reports or shared with class leadership. No bequest dollar amount will be directly associated with a donor's name. Documented bequest dollar amounts will be aggregated and included in overall class totals at reunions.

Please state your preference:

Signature

- □ I/we give Amherst College permission to publish my/our name(s) in College reports and share with class leadership as having documented a bequest intention for the College and have my/our bequest intention figure included in aggregate totals.
- □ I/we prefer for this gift to be anonymous in that my/our name(s) will never be published in any College reports or shared with class leadership as having documented a bequest intention for the College however, I/we wish that my/our bequest intention figure be added to aggregate totals.
- I/we prefer for this gift be totally anonymous, such that my/our names will never be published or shared with class leadership in connection with bequest intentions and my/our bequest intention figure will NOT be included in aggregate totals.

If my/our intentions change, I/we will inform the College.

Signature	Date

Please return this form and relevant documents to:

Julie R. Lackner, J.D. Director of Gift Planning Amherst College PO Box 5000 Amherst, MA 01002-5000