



Thompson Foundation *for* Autism

Awareness. Advocacy. Action.

Estate Gift Intention Form

So that we may properly thank you and acknowledge your future gift to the Thompson Foundation for Autism, please complete the following information about your gift.

Name _____ Birthdate _____ Spouse Name (*if applicable*) _____ Spouse Birthdate _____

Mailing Address _____ Apt. Number _____ Telephone (home) _____ Telephone (cell) _____

City _____ State _____ Zip Code _____

Type of Gift

Please attach a copy of the page from your plan that references the Thompson Foundation for Autism. **This document will be held in strict confidence.**

Will Living Trust Life Insurance Retirement Other: _____

Description of Gift

Please describe the nature of your gift to the Thompson Foundation for Autism (for example- percentage of estate, specific dollar amount, description of specific property, etc.).

As of today's date, I estimate the value of this provision in my estate plan to be: \$ _____

Purpose of Gift

- This is an unrestricted gift
 This Gift is to be used for the following purpose or program:

I/We understand that this is not a legal or binding commitment on my/our estate. The Thompson Foundation for Autism should understand that the size of this future gift may be significantly different from the amount estimated above. If for any reason in the future the Thompson Foundation for Autism is no longer in my/our plan, I/we will notify you so that you can update your records.

Signature

Date

Signature

Date



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How To Include The Thompson Foundation for Autism In Your Estate Plan:

To make a future gift to the Thompson Foundation for Autism you'll want to create or revise the documents that govern your gift. Describe how you plan to make the gift and the purpose or program your gift will support. To include MU in your living trust, we suggest that you and your legal advisor consider the following language:

1. Describe how you plan to make the gift

- "...to the Thompson Foundation for Autism, a Missouri charitable not-for-profit corporation, the sum of \$ _____
- _____ (description of specific property)
- _____ % of my estate owned by me at my death
- The residue of my property owned by me at my death

2. Describe the Purpose or Program that will benefit from your gift

- For the unrestricted use by the Thompson Foundation"
- For the unrestricted use and benefit of the _____ program at the Thompson Foundation for Autism."
- To fund the previously established _____ fund and any amendments thereto."
- To establish the _____ fund which is to be used for _____
_____ in the Thompson Foundation for Autism.

Upon your request, the Thompson Foundation for Autism will prepare a separate fund document at no cost to you. Your trust may then direct the gift to the fund. By using this planning strategy, you will retain the option to alter the purpose or use of your fund without the expense or inconvenience of amending your estate plan.

3. Let us Know!

When you let us know that you've included the Thompson Foundation for Autism in your estate plan, we can plan for the future and prepare to follow your gift instructions. We want to make sure we fulfill your wishes and preserve the legacy you have planned for your gift. Please contact us at the information below:

Thompson Foundation for Autism
Attn: Myles Hinkel – Executive Director
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573-884-0777 * myles@thompsonfoundation.org
Thompson Foundation for Autism Tax I.D. No. 20-8293152