



## CONFIDENTIAL STATEMENT OF ESTATE INTENTIONS

Name \_\_\_\_\_ Class year or affiliation \_\_\_\_\_

Mailing Address \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**I have made provisions for The GreenMount School in my estate as follows:**

*Estimated Amount of the Current Value of your Gift*

- Fixed dollar amount as an outright gift in:
  - \_\_\_\_\_ My will or trust \$ \_\_\_\_\_
  - \_\_\_\_\_ Surviving spouse or partner's will or trust
- Percentage ( \_\_\_\_\_ % ) for GreenMount of the residue clause of a \_\_\_\_\_ will or \_\_\_\_\_ revocable trust \$ \_\_\_\_\_
- Percentage ( \_\_\_\_\_ % ) remainder for GreenMount in a Charitable Trust \$ \_\_\_\_\_
- Percentage ( \_\_\_\_\_ % ) for GreenMount as beneficiary of IRA, 401(k), TIAA-CREF or other pre-tax retirement account \$ \_\_\_\_\_
- Other, please check if applicable: \$ \_\_\_\_\_
  - \_\_\_\_\_ Contingent provision to take effect if other beneficiaries predecease me
  - \_\_\_\_\_ Beneficiary of a paid-up life insurance policy
  - \_\_\_\_\_ Gift of real estate (requires approval of GreenMount's Gift Acceptance Committee)
  - \_\_\_\_\_ Personal property, including art, personal collections, etc. (requires approval of GreenMount's Gift Acceptance Committee)

**Designation: I would like my gift to support the following school initiative:**

- Financial Aid
- Board Directed Reserve Fund
- Campus Improvement
- Wherever most needed
- The Fund for GreenMount
- Other: \_\_\_\_\_

You will be contacted to insure we can carry out your wishes.

**Public**

**Recognition:** May we publicly honor you as a member of The Waverly Circle so that others may be inspired to give through your example?  Yes  No

Would you be willing to share your personal story in one of our publications?  Yes  No

Attachments or letters that further describe the nature of the above provision(s) are welcome. By signing this form, I am informing The GreenMount School that the above provisions are in effect as of this date; however, there is no binding pledge intended or assumed.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Please return to:**

**Development Office ♦ 501 W. 30<sup>th</sup> Street ♦ Baltimore, MD 21211  
410-235-6295 ♦ Extension 23**