



SACRAMENTO STATE

INSTRUCTIONS FOR PLANNED GIFT DESIGNATION

I/We have made provisions in my/our estate plans to remember Sacramento State and wish to share my/our philanthropic wishes with the University.

Name: _____ Birthday: ____ / ____ / ____

Name: _____ Birthday: ____ / ____ / ____

Address: _____

Phone: (_____) _____ - _____ E-mail: _____

I/We have provided for The University Foundation at Sacramento State* through my/our:

- | | |
|---|---|
| <input type="checkbox"/> Will, Living Trust, or Testamentary Trust | <input type="checkbox"/> Charitable Remainder Trust |
| <input type="checkbox"/> IRA/Retirement Plan (<i>beneficiary designation</i>) | <input type="checkbox"/> Charitable Gift Annuity |
| <input type="checkbox"/> Life Insurance Policy | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Other (<i>please specify</i>) _____ | |

Gift Details:

- ☐ the sum of \$ _____ or _____ % of the estate, account, or policy; *or*
- ☐ all the rest, residue, and remainder of the estate, both real and personal (after all other bequests have been paid); *or*
- ☐ (*Describe specific property to be given*) _____; *or*
- ☐ Other (*please specify*): _____.

This gift has an approximate value today of \$ _____. (*Why do we ask? ***)

- ☐ Enclosed is a copy of the relevant portion of the estate documents. (*Recommended*)

Designation: This gift is intended to support (*please specify college, unit, program, or fund*):

The **Sacramento State Legacy Circle** honors those special donors who have included a legacy gift to Sac State in their estate plans. As a Legacy Circle member, you will be recognized with a special certificate signed by the President, a distinctive lapel pin, and invitations to special University events.

- ☐ I/We would like to be included in the Legacy Circle. Please list my/our name(s) as:

_____.

- ☐ I/We would like my/our membership in the Legacy Circle to remain **ANONYMOUS**.

This statement is an expression of my/our current plans and may be revoked at any time. I/We understand that this statement is not legally binding on my/our estate and that this information is used only to facilitate proper designation of my/our gift at the time it arrives and to estimate gift commitments.

Signature

Date

Signature

Date

Please complete this form and return to:

**Sacramento State
University Development**

Attn: Steven R. Loya
6000 J Street, MS 6030
Sacramento, CA 95819

Questions? Contact Steven R. Loya, Director of Planned Giving, at (916) 278-6115 or Loya@csus.edu.

For more information on legacy giving, visit csus.planningyourlegacy.org

* The University Foundation at Sacramento State (formerly the CSUS Trust Foundation) is the philanthropic arm of the University. All gifts in support of the goals, missions, and programs of Sacramento State (including all colleges, schools, academic, and non-academic units) are received through the Foundation. **Federal tax ID number 94-3001359.**

**** Why are we asking for this information?** We ask for a dollar amount, or estimated dollar amount, of this commitment today to provide us with a “big picture” view of total fundraising and private support. The University does not consider this a pledge, and we understand an estimated amount stated here may change before the gift arrives in the future. Additionally, as part of our annual fiscal reporting, we file the Voluntary Support of Education (VSE) Report—the standard national fundraising report that most universities file. The CSU system requires a supplemental internal report adding testamentary commitments and pledges to these VSE numbers. This information is confidential and never publicized.