

BEQUEST INTENTION FORM

Thank you for including the **South Asian Council for Social Services** in your future planning so we can continue to power an equitable New York for generations to come. Please let us know of your intentions via the form below.

My planned gift to SACSS is through my (please check all that apply):

🗌 Will	Life Insurance Policy	If you chose Other, please specify:
Living Trust	Charitable Trust	
Retirement Account	Other	

If you've marked Retirement Account and/or Life Insurance Policy above, please provide the fund or company where the account is held:

OPTIONAL My gift to SACSS is a:	Gift value in dollars (\$):	
Specific dollar amount	\$00	
Percentage	۰	
Knowing the diffusive will help SACSS plan, however we understand if you dealing to share this information at this		

Knowing the gift value will help SACSS plan, however we understand if you decline to share this information at this time. Please specify a gift designation or General Operating funds:

Do you wish to remain Anonymous with respect to your planned gift?

No, SACSS <i>may publicly list my name</i> as a SACSS Legacy Circle supporter.	Yes, I request that my name <i>not</i> be listed publicly in connection with my planned gift.	
Donor Contact(s):		
First & Last Name (1):	First & Last Name (2):	
Mailing Address:	City: State: ZIP:	
Telephone Number:	Email Address:	

Contact SACSS Legacy Circle: For a confidential conversation or to learn more about how to realize your philanthropic priorities by gift planning with SACSS, please contact:

Sudha Acharya, Executive Director (718) 321-7929 email: <u>sudha@sacssny.org</u> & <u>sacss@sacssny.org</u>

We recognize that this does not constitute a binding commitment or the legal promise of any future donation to SACSS. We understand that bequests are revocable and that your estate plans may change. If any changes are made to this provision, please notify SACSS at your earliest convenience. THANK YOU.

PLEASE SEND THIS COMPLETED FORM TO:

South Asian Council for Social Services, 143-02 45th Ave, Flushing NY 11355 or scan and email the form to <u>sacss@sacssny.org</u> EIN: 11-3632920