

Legacy Enrollment Form

There are several ways to support the National Council of Jewish Women, Inc. (NCJW) while providing benefits to you and your loved ones in the form of tax savings, income in your retirement years, and more. By including NCJW in your will, trust, or other estate plans, you stand with others who have joined in ensuring the fight for social justice will continue for the next generation.

- | | |
|--|---|
| <input type="checkbox"/> I have included NCJW, Inc. in my estate plans by will, trust, retirement plan beneficiary, or insurance policy beneficiary.

<input type="checkbox"/> Section _____

<input type="checkbox"/> Provision for both NCJW, Inc. and Section as noted above. | <input type="checkbox"/> Yes, NCJW may list my name as a member of the Legacy Society in the NCJW annual report and other publications.

<input type="checkbox"/> No, I prefer that my name be kept confidential at this time. Please list me as "anonymous."

<input type="checkbox"/> I would consider including NCJW in my estate plans. |
|--|---|

Name _____ Date of birth ____/____/____
 Street address _____ City _____ State _____ Zip _____
 Phone (optional) _____ Email (optional) _____
 Your signature _____ Today's date ____/____/____

Optional additional information

Please fill in the information below to the extent you are comfortable sharing. Any information provided is strictly confidential.

I have provided a gift through my estate plan using the following method:

- | | |
|--|--|
| <input type="checkbox"/> Gift by will or trust | <input type="checkbox"/> Savings account or investment account beneficiary |
| <input type="checkbox"/> Retirement plan beneficiary | <input type="checkbox"/> Gift of property or securities |
| <input type="checkbox"/> Life insurance policy beneficiary | <input type="checkbox"/> Other trust gift |

This gift is:

- | | |
|---|--|
| <input type="checkbox"/> A percentage of the remainder of my estate, trust, or retirement plan: (____%) | <input type="checkbox"/> A gift of a specific amount: \$ _____ |
|---|--|

Please add any other details you wish to share: _____

Return the enrollment form to:

National Council of Jewish Women, Inc. • Attn: Development
 P.O. Box 78198 • Washington, DC 20013 • development@ncjw.org

Suggested bequest language to share with your attorney:

"After fulfilling all other provisions, I give, devise, and bequeath ____% of the residue of my estate (or \$ _____ if a specific amount) to the National Council of Jewish Women, Inc. [tax ID # 13-1641076] currently with offices at P.O. Box 78198, Washington, DC 20013."

Thank you for your commitment to and support of NCJW!

The information about your planned gift is confidential, nonbinding, and for internal accounting purposes only.