



Visionary Society / Statement of Intent

Thank you for your commitment to the Contemporary Art Museum St. Louis and your investment in its future. We ask that you complete this form with as much detail as you are willing to share. Any information about your gift will remain confidential and does not create a binding obligation.

My/Our Information:

Name (print): _____

Spouse Name (if joint gift): _____

Address: _____

City: _____, State: _____ Zip Code: _____

Phone: (M) _____ (W) _____ (C) _____

Email: _____

Date of Birth: _____

*Note for couples: We are happy to list you either separately or as a couple, depending on your preference. If you would like to be recognized as a couple, please complete this form accordingly. If you are making separate planned gifts and prefer to be listed individually in all documents and/or publications, please submit separate forms, one in each name.

Gift Information:

I/We have provided a gift to Contemporary Art Museum St. Louis as set forth in my/our:

Will or Trust

Charitable Remainder Unitrust

Life Insurance Policy

Retirement Plan or Beneficiary Designation (401(k), 403(B), IRA, Keogh, Brokerage Account)

Other Asset(s) (please describe):

Contemporary Art Museum St. Louis is a contingent beneficiary of the indicated asset above (Please Explain): _____

The current estimated value of my/our gift is \$_____. My/Our gift is _____% of the asset indicated above. If a percentage is given, what is the current estimated value of the percent in today's dollars \$_____.



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Gift Designation:

Unrestricted bequests received by CAM will be designated to the endowment. The CAM endowment is composed of two funds: Permanently Restricted and Board Designated. CAM will allocate an undesignated endowment gift into the Board Designated endowment fund unless otherwise specified.

Recognition:

You will automatically be enrolled in CAM's Visionary Society and included in donor listings and event invites unless otherwise requested.

I/we prefer no public recognition

Please list my/our name(s) as follows:

Estate Contact Information: Although optional, the following information is helpful when acknowledging and administering your future gift.

Executor, Trustee (if your gift is through a Will, Trust):

Name: _____

Address: _____

City _____, State: _____ Zip: _____

Phone: _____ Email: _____

Administrating Company (i.e. TIAA, Fidelity, etc., if your gift is through a retirement account or life insurance policy):

Administering Company: _____

Contact Name: _____

Address: _____

City _____, State: _____ Zip: _____

Phone: _____ Email: _____

Additional Contact/Relationship you may want us to know (family, attorney, etc.):



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Name: _____

Address: _____

City _____, State: _____ Zip: _____

Phone: _____ Email: _____

CAM is truly grateful for your gift. Please share with us your decision for making this bequest:

I/We understand this form does not create a binding obligation and any details about my/our gift will remain confidential. The Contemporary Art Museum St. Louis understands that the size of my/our future gift may change.

Signature: _____

Spouse Signature (if joint): _____

Date: _____

Please return this form to: Contemporary Art Museum St. Louis, 3750 Washington Blvd.,
St. Louis, MO 63108-3612| email: giving@camstl.org| phone: 314.535.4660