



NORTH COLORADO
MEDICAL CENTER FOUNDATION

SUGGESTED BEQUEST LANGUAGE

Unrestricted Bequest:

"I give, devise and bequeath, to the **North Colorado Medical Center Foundation, Inc.**, a Colorado nonprofit corporation, Federal Tax ID # 84-0718355, (insert dollar amount, percentage (%) of estate or exact description of property to be devised), for its charitable purposes."

Restricted Bequest:

"I give, devise and bequeath, to the **North Colorado Medical Center Foundation, Inc.**, a Colorado nonprofit corporation, Federal Tax ID #84-0718355, (insert dollar amount, percentage (%) of estate or exact description of property to be devised) for the benefit of the (specific program or department) at the North Colorado Medical Center."

Restricted Endowment Bequest:

"I give, devise and bequeath, to the **North Colorado Medical Center Foundation, Inc.**, a Colorado nonprofit corporation, Federal Tax ID #84-0718355, (insert dollar amount, percentage (%) of estate or exact description of property to be devised) to establish the _____ (name) Fund to be held in perpetuity as an endowment for the benefit of the (specific program or department) at the North Colorado Medical Center."

The distribution of my bequest shall be received and administered as a pure endowment by the North Colorado Medical Center Foundation Inc., whereby only the income shall be used to provide ongoing support to the (specific program or department).

Residual Bequest:

"Upon my death, after paying expenses of last illness and funeral expenses, the personal representative shall distribute the assets of the estate as follows:

- A. To...
- B. To...
- C. To...
- D. All of the rest, residue, and remainder of my estate, of whatsoever nature or description, whether real, personal, or mixed, or where so ever situate of which I may die seized and possessed or to which I may be entitled at the time of my death, to **North Colorado Medical Center Foundation, Inc.**, a Colorado nonprofit corporation, Federal Tax ID #84-0718355, for its charitable purposes."

Contingent Bequest:

“Upon my death, after paying expenses of last illness and funeral expenses, the personal representative shall distribute my estate to (insert to whom you would like to receive your estate). Should the above named not survive me, then distribute my entire estate to the **North Colorado Medical Center Foundation, Inc.**, a Colorado nonprofit corporation, Federal Tax ID #84-0718355, for its charitable purposes.”

The mission of the North Colorado Medical Center Foundation is to enhance the health of the community and its citizens through philanthropy.

The North Colorado Medical Center Foundation is a 501(c)(3) tax exempt charitable organization that raises and manages private funds to endow scholarships, purchase equipment, manage programs, construct facilities and overall support the North Colorado Medical Center. The federal tax identification number of the North Colorado Medical Center Foundation, Inc. is 84-0718355.

This language is merely provided as an example for commitments designated to the North Colorado Medical Center Foundation and is not intended to be a substitute for legal advice.

For additional information, please contact:

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