



**YES! I would like to make a contribution to Mount Saint Vincent.**

Enclosed is my tax-deductible gift of:

- \$5,000
- \$1,000
- \$500
- \$250
- \$100
- \$\_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

The table below illustrates how various tax credits and deductions may reduce the annual after-tax cost of your donation.

Annual Contribution	\$5,000	\$1,000	\$500
Child Care Tax Credit	(\$2,500)	(\$500)	(\$250)
Federal Tax Savings	(\$749)	(\$150)	(\$75)
Colorado Tax Savings	(\$231)	(\$46)	(\$23)
Total Tax Savings	(\$3480)	(\$696)	(\$348)
<b>After-Tax Cost of Giving</b>	<b>\$1,520</b>	<b>\$304</b>	<b>\$152</b>

*The figures above are based on a 33% tax bracket. This information should not be construed as tax advice. Please consult your tax advisor as your situation may vary.*

I prefer to be anonymous in publications.     Enclosed is a check made payable to Mount Saint Vincent.

Please accept my credit card donation. Card Type:  Visa     MasterCard     AmEx     Discover

Account Number \_\_\_\_\_ Exp. Date (mm/year) \_\_\_\_\_ CVV code \_\_\_\_\_

Signature \_\_\_\_\_

**Recurring payments**

Please charge \$\_\_\_\_\_ to my credit card each:     **Month**     **Quarter**

My employer will match my gift. Company Name: \_\_\_\_\_

**I would like to make a gift:**

In Honor of /  In Memory of: \_\_\_\_\_

Please notify (Name & Address) of my gift: \_\_\_\_\_

\_\_\_\_\_

- I am interested in making gifts of appreciated stock, real estate, insurance or other assets.
- I am interested in including Mount Saint Vincent in my will, trust, or estate plan. Please send me more information.
- I have included Mount Saint Vincent in my will, trust, or estate plan. Please send me information about the Sister LaVonne Legacy Society.

Please mail or drop off donation form to:

Mount Saint Vincent | 4159 Lowell Blvd., Denver, CO 80211 | 303-458-7220 | www.MSVhome.org