



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)
After-Tax Cost of Giving	\$1,520	\$304	\$152

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