## LETTER OF INTENT TO JOIN INTUIT'S LEGACY SOCIETY



Please complete and submit this Letter of Intent to help Intuit recognize your gift intentions. Please return this form to: Intuit: The Center for Intuitive and Outsider Art Attn: Claire Fassnacht, Development Manager 756 N. Milwaukee Avenue Chicago, IL 60642

312.624.8000 or email claire@art.org Federal

Tax ID Number: 36-3772452

As evidence of my/our desire to provide a legacy of support to Intuit: The Center for Intuitive and Outsider Art, I/we hereby inform Intuit: The Center for Intuitive and Outsider Art that I/we have made a provision for a gift to the museum in my/our estate plans.

Name (s)		
Address		
City	State	Zip
Phone	Email	
It is my/our intent to leave a legacy gift to Int	uit: The Center for Intuitive and	Outsider Art through my/our:
☐ Bequest in Will / Living Trust	☐ Bank, Brokerage or Other Financial Account	
☐ Life Insurance Policy	☐ Beneficiary or Successor of a Donor Advised Fund	
☐ Charitable Trust	<ul> <li>□ Beneficiary Designation in my/our Qualified Retirement</li> <li>Plan or Commercial Annuity</li> <li>□ Other (please specify)</li> </ul>	
☐ IRA / Retirement Account		
☐ Endowment Fund		
My/our future gift to support Intuit's Legacy S	Society:	
$\ \square$ Is a percentage of my estate and is worth ap	proximately: \$	
☐ Is in the specific amount of: \$		
$\hfill\Box$ I/we wish to keep the value of my/our future	gift confidential.	
Description of the provision (s) and what I/we	would like my/our support to ac	complish:

Please enroll me/us in the Intuit Legacy So	ociety under the following conditions:	
☐ Feel free to publish my/our name (s) amo a future give to benefit Intuit: The Center	• • • • • • • • • • • • • • • • • • • •	
Please print your name(s) as you wish to be		
☐ Do not list my/our names (anonymous giff	t).	
Intuit recognizes that values are subject to chan to help Intuit project possible future financial su		
Signature	Date	
I/we worked with the following advisor to es	stablish the gift:	
Name		
Company Name (if applicable):		
Address		
City	State	Zip
Phone	Email	