



MINNESOTA LEGACY SOCIETY INFORMATION FORM

I believe in the mission of the Minnesota Historical Society. To help provide for MNHS's future needs, I have made a planned gift to MNHS through a:

- Will or revocable trust
- Life insurance policy*
- Donor-advised fund remainder*
- Charitable remainder trust
- Retirement account*
- Other (please specify) _____

* Name of organization or company holding assets: _____

If the future gift were to be realized today, the value would be approximately:
\$ _____

(It is understood that this amount is revocable and can change over time.)

Gift designation and/or comments about why I/we decided to make this gift (optional - attach additional information as necessary):

Planned gift donors are members of the Minnesota Legacy Society. Please enroll me/us in the Minnesota Legacy Society as follows:

- Feel free to publish my/our name(s) among lists of Legacy Society members as inspiration for others to leave a future gift to benefit MNHS. Please list my/our name(s) as:

NOTE: Legacy Society listing does NOT include any reference to gift amount.

- Please do not publish my/our name(s) on donor rosters (list as "anonymous")

Name: _____

Date of Birth: _____

Second Name: _____

Date of Birth: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Second Phone: _____

Second Email: _____

Signature(s): _____

Date: _____

Thank you for sharing your current plans with us, and we recognize that priorities can change over time. MNHS deeply appreciates your commitment to its mission and future—thank you!