



# Create a legacy

## FOR FUTURE GENERATIONS

### CONFIDENTIAL STATEMENT OF PLANNED GIFT PROVISION

I/We have provided for the future of The Museum of Flight by naming the Museum a beneficiary of my/our:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Will/Living Trust     | <input type="checkbox"/> IRA/Retirement Plan | <input type="checkbox"/> Bank/Investment Account |
| <input type="checkbox"/> Life Insurance Policy | <input type="checkbox"/> Charitable Trust    | <input type="checkbox"/> Other: _____            |

### PLANNED GIFT AMOUNT

Estimated value of my/our planned gift: \$\_\_\_\_\_

or

Percentage of my/our estate: \_\_\_\_\_%, with an estimated gift value of: \$\_\_\_\_\_

### SAMPLE LANGUAGE FOR WILL OR LIVING TRUST

I bequeath (percentage/dollar amount) to Museum of Flight Foundation, a nonprofit organization located at 9404 East Marginal Way S., Seattle, WA, 98108, Federal Tax ID #91-0785826, for general use and purpose.

### PLANNED GIFT DETAILS

- ☐ I/We updated my/our relevant estate planning documents to include a gift to The Museum of Flight.  
This change was made on the following date: \_\_\_\_\_
- ☐ My/Our planned gift is contingent upon the passing of a spouse, partner, or child.

**Unrestricted gifts provide the greatest flexibility and will support the Museum's most urgent needs.**

If you have special instructions regarding your planned gift, please state below.

Special Instructions/Restrictions:

## DONOR INFORMATION

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Second Signature (if necessary) \_\_\_\_\_ Date \_\_\_\_\_

**Eagle Heritage Society** members are recognized on the Museum's website, donor wall, and annual report. We are honored to include you in this distinguished group, which will inspire others to do the same and help transfer the legacy of aviation and aerospace history and achievement to future generations.

☐ I/we give approval to have my/our name(s) included in The Museum of Flight's publications.  
Please recognize as:  
\_\_\_\_\_

☐ I / we would prefer to remain anonymous and not be included in The Museum of Flight's publications.

**This form will remain confidential and does not create a legally-binding commitment.** The Museum recognizes that the value of a future gift, as well as the provision creating the gift, may change over time. If possible, please consider notifying us of future changes in your charitable plans. Documenting your intentions allows us to better steward your future gift and to personally express our gratitude to you now.

## DOCUMENTATION OPTIONS

The Museum is grateful for additional documentation regarding your planned gift:

- A copy of the portion of the will, trust document, or beneficiary designation form that references your planned gift to the Museum.
- The document's signature page, including the date the document was signed.
- If the bequest is part of your spouse/partner's estate plan and will not be realized until the death of the survivor, please include their documents as well.

☐ I/We do not wish to provide documentation at this time.

Please save this form and send with available documentation to:

Email: [Jmartin@museumofflight.org](mailto:Jmartin@museumofflight.org)

Mail: The Museum of Flight

Attn: Planned Giving

9404 East Marginal Way South, Seattle, WA 98108

Questions or Comments? Contact us:

Joseph Martin

*Planned Giving Officer*

Phone: 206.768.7199

Email: [Jmartin@museumofflight.org](mailto:Jmartin@museumofflight.org)

**Thank you for supporting The Museum of Flight...for future generations.**