



Legacy Gift Declaration

Your gift, your legacy

A legacy gift is a powerful and meaningful way to honor your life and make a difference in science, outreach, and education.

Please let us know if you've included the Morgridge Institute for Research Foundation in your estate plan by filling out this non-binding form so that together we can make sure to realize your desired impact through your gift. We are so grateful for your support.

Name(s): _____

Address: _____

City

State

Zip

Phone: _____ **Email:** _____

My/our legacy gift includes:

(Please select all applicable)

Bequest/will

Real estate

Trust

Other: _____

Retirement plan

Life insurance

With the understanding that values are subject to change and that this legacy gift is completely non-binding, the approximate value of this future gift is:

\$ _____



This gift is:

(Please select one)

Unrestricted: to be used to benefit the Morgridge Institute for Research Foundation where the need is greatest

To be used to support the following research areas, purposes, and/or programs:

My/our provision names the *Morgridge Institute for Research Foundation* as the beneficiary.

Signature of donor: _____ Date: _____

Signature of donor: _____ Date: _____

Please return this form and return it to:

Bill Swisher
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Morgridge Institute for Research
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Madison, WI 53715

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Email: bswisher@morgridge.org