

# ELIZA LAUGHLIN SOCIETY

## Legacy Challenge

### LEGACY CHALLENGE REPLY

Yes, I/we are interested in meeting the Legacy Challenge!

Please check one:

- I have already included The Phillips Collection in my estate plans.
- I plan to include The Phillips Collection in my estate plans.
- I would like more information about making a legacy gift.

### MY/OUR GIFT

My/Our gift is or will be made through: *(check all that apply)*

- Will or Trust
- Retirement Account / IRA Beneficiary
- Life Insurance Policy
- Donor Advised Fund
- Other: \_\_\_\_\_
- I/We prefer not to share details at this time.

### GIFT INTENTION

- I/We intend this gift to be unrestricted, supporting the museum's greatest needs and opportunities.
- I/We would like to designate this gift for a specific purpose:  
\_\_\_\_\_  
\_\_\_\_\_

### RECOGNITION

Please list my/our name(s) as follows: \_\_\_\_\_

- I/We are happy to be recognized as part of the Eliza Laughlin Society.
- I/We prefer to remain anonymous.

### CONTACT INFORMATION

The Phillips Collection respects your privacy. Information collected will not be shared outside of our organization.

NAME

ADDRESS

CITY

STATE

ZIP

EMAIL

PHONE

SIGNATURE

DATE

### THANK YOU!

Thank you for helping ensure that The Phillips Collection continues to inspire future generations. In recognition of your commitment, you are invited to join the Eliza Laughlin Society, our legacy giving community. Details are included in the enclosed page or on our website.

### PLEASE RETURN THIS FORM IN THE ENCLOSED ENVELOPE OR CONTACT:

Julie Carter  
Senior Planned Giving Officer  
[plannedgiving@phillipscollection.org](mailto:plannedgiving@phillipscollection.org)  
202.387.2151 x365

[PhillipsCollection.org/ELS-Challenge](http://PhillipsCollection.org/ELS-Challenge)