

Confidential Letter of Intent

Name(s)	
Address	
City, State, Zip Code	
Email address	
Telephone	Best time to call
Birthdate(s)	Preferred name for recognition (or indicate Anonymous)
We would like to be counted as members of Institute of Art in our:	the New Century Society, having made a provision for the Minneapolis
Will Revocable Trust Irrevocable Trust Insurance Policy	Retirement Plan Charitable Gift Annuity Charitable Remainder Trust Other
	ed with an estate gift or outright gift of \$250,000 or more (minimum al information on creating an endowment fund at Mia for the purpose
Art acquisition Unrestricted (general operations) Gallery naming*	 Educational programs Art conservation Named curatorial position**
Signature	Date
Signature	Date

Thank you for helping Mia properly recognize and direct your estate gift. Your charitable intentions and estate provisions are deeply appreciated by the museum.

*Gallery naming available with a gift of \$500,000 or more

**Named Curatorial positions available with a minimum gift of \$2,000,000