

WHAT IS YOUR LEGACY?

A gift to the Institute for Justice through your estate will help preserve the freedoms you value for generations to come, and it will ensure that IJ has the resources to continue fighting for liberty as long as it is challenged.

By acting now, you can also generate an immediate cash donation to IJ—equal to 10 percent of your future gift's value—thanks to a generous \$2 million matching grant provided by Bernard and Lisa Selz.

How the Selz Legacy Challenge Works

- Name the Institute for Justice in your will or trust, or as a beneficiary of your retirement plan, savings account, or life insurance policy.
- Complete the Selz Legacy Challenge Matching Form (reverse side).
- A matching donation of up to \$25,000 will be made in your name, while matching funds are available.



Please return to:

Institute for Justice Four Pillars Society 901 N. Glebe Road, Ste. 900 Arlington, VA 22203 For questions or more information contact:

Melanie Hildreth Four Pillars Society Director (703) 682-9320, ext. 222 melanie@ij.org



Selz Legacy Challenge Matching Form

1. I have included the Institute for Just	tice as a beneficiary of r	my:
🖵 Will/Living Trust 🕒 Retiren	nent Plan 📮 Savings	Account
☐ Life Insurance Policy ☐ Ch	aritable Trust	
2. Amount of Gift:		
My bequest is in the amount	t of specific an	nount
My bequest is stated as a per	rcentage of my estate,	or is an asset with fluctuating value,
and is currently worth appro	estimat	ed value
(Please provide your best go based on the approximate co		e value of your future bequest sets.)
I wish to keep the value of m (Your intended bequest will		
3. Other Considerations:		
My bequest to IJ depends up or partner.	pon a contingency, suc	h as the prior death of a spouse
My spouse/partner has also of the second-to-pass.	made provisions for IJ.	IJ will receive a gift upon the death
4. Optional: May we have a copy of the beneficiary designation forms, if available to the beneficiary designation forms.		
Signature:		Date:
Name (Please Print):		
Address:		
City:	State:	ZIP:
	Juic	
Email:	Phone:	