

# To Learn More

For more information, please return this confidential reply card to the Goldwater Institute.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (OPTIONAL) \_\_\_\_\_

EMAIL (OPTIONAL) \_\_\_\_\_

**GOLDWATER**  
INSTITUTE

500 EAST CORONADO ROAD  
PHOENIX, AZ 85004  
TEL 602.462.5000 | FAX 602.256.7045  
WWW.GOLDWATERINSTITUTE.ORG

Please send me information about:

- Including the Goldwater Institute in my will or estate plan
- Naming the Goldwater Institute as a beneficiary of my life insurance policy or individual retirement account
- Establishing a charitable remainder trust
- Establishing a charitable lead trust

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- I am considering a legacy gift to the Goldwater Institute. Please contact me to discuss the specific opportunities which may be available to me.
  - I have already designated the Goldwater Institute as the recipient of a legacy gift and wish to be included as a member of the Barry Goldwater Legacy Society.
  - I have already designated the Goldwater Institute as the recipient of a legacy gift, but wish for my gift to remain confidential.

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