

Questions? Need assistance? Please contact:

John Elbare, MBA, CFP Director of Philanthropy

Special Operations Warrior Foundation PO Box 89367 Tampa, FL 33689

813-805-9400 Fax: 813-805-0567

TAX INFORMATION

The Special Operations
Warrior Foundation is
recognized by the IRS
as a tax-exempt public
charity. Our federal tax ID
number is 52-1183585.







Become a Member of the Eagle Claw Society

The Eagle Claw Society has been formed to thank and honor those who have arranged planned gifts to the Special Operations Warrior Foundation through bequests, life income gifts, insurance policies and other estate planning vehicles.

These thoughtful donors will help ensure that the children of special operations forces who die in the line of duty will each receive full funding for a college education.

Named after Operation Eagle Claw, which sought to free the hostages in Iran in 1979, the Eagle Claw Society invites you to become member by returning the simple enrollment form.

MEMBER BENEFITS

The Eagle Claw Society members are important VIPs in the Special Operations Warrior Foundation and are provided with a variety of activities and benefits throughout the year:

- A personal Eagle Claw Society plaque for your home of office
- Invitations to major annual foundation events and activities
- Your name(s) listed on the Eagle Claw Society plaque in the lobby of the Special Operations Warrior Foundation.

To enroll, simply arrange your planned gift and then send us your Eagle Claw Society Enrollment Form, on the following page.

Eagle Claw Society ENROLLMENT FORM



	Warrior Foundation, I	accept have arranged my estate gift as:	
		have all alliged filly estate gift as.	
☐ a bequest in my	•		
☐ a beneficiary of n	•		
		count or investment account	
☐ a beneficiary of a			
•	charitable remainder		
☐ Other			
		of the Eagle Claw Society as lor Operations Warrior Foundation	
\Box I designate this	gift for the SOWF Endo	owment Fund	
The approximate va	alue of this gift is \$	(optional)	
Signature:		Date:	
PERSONAL INFO Name(s): (As ye		Eagle Claw Society Honor Roll)	
Preferred Mailing A	ddress:		
_		☐ You may list my/our name	e(s) on the Honor Roll
		\square Do not list my/our name(s)
	Ev	vening	
	oy: □Mail □Email [
, , , , , , , , , , , , , , , , , , , ,		 ☐ Golf Tournaments ☐ Volunt	ceering
☐ Estate Planning			3
Please return to:	Special Operations W Or fax to: 813-805-05	/arrior Foundation PO Box 8936	7 Tampa, FL 33689 Thank You!