## IRA CHARITABLE ROLLOVER



Sample Request from Donor to IRA Plan Administrator  Date:	
To:	
Dear:	
•	rom my Individual Retirement Account number is my understanding that a charitable distribution is allowed Act of 2016 (or "ATRA") and Section 408(d)(8) of the Internal
Please issue a check in the amount of \$	_ payable to Des Moines University at the following address:
Des Moines University Attn: Accounting 8025 Grand Ave West Des Moines, IA 50266	
The tax identification number of Des Moines University	is 42-0730347.
In your transmittal documents to Des Moines University record. Please copy me on your transmittal.	, please include my name and address as the donor of
· · · · · · · · · · · · · · · · · · ·	usion as allowed by applicable federal law H.R. 8 – the IRA ember 18, 2015, that includes a permanent extension. This ir 31st of the intended tax year.
If you have any questions regarding this request, please	e contact me at the following phone number
Thank you for your attention to this request.	
Sincerely,	
Signature	Date
Printed Name	Address: street, city, state, zip

Please return this form to your IRA Plan Administrator. Do not send this form to Des Moines University.

\*Please note that some Plan Administrators may require a Notary Public Signature or a Medallion Signature Guarantee

