



# Request for qualified charitable distribution from individual retirement account

## TIAA Trust, N.A., directed trustee

Fields marked with an asterisk ( \* ) are required to execute your QCD.

Individual retirement account ("IRA") name:\* \_\_\_\_\_

IRA number:\* \_\_\_\_\_

The undersigned directs TIAA Trust, N.A. ("TIAA Trust"), as directed trustee of the IRA referenced above, to withdraw from the above-referenced IRA and distribute said amount directly to the charitable organization named below, at the address also shown below.

Before making a gift, you should confirm that the charitable organization named below is qualified to accept qualified charitable contributions ("QCDs"). QCDs cannot be made to donor-advised fund sponsors, private foundations and supporting organizations, even though they are categorized as charities. A QCD must meet the requirements of Section 408(d)(8) of the Internal Revenue Code of 1986, as amended. Generally speaking, a QCD must be made directly by the IRA trustee/custodian to the charity. **The maximum amount that can qualify as a QCD is indexing for inflation each year per IRS, view [irs.gov](https://www.irs.gov) website, in aggregate.** You cannot claim a QCD as a charitable tax deduction. Please contact your tax advisor for additional information.

Notice of charitable contribution will appear on your statement and 1099R for your records. Confirmation to the charity will consist only of the check and check stub. The check stub will display your full name and address, memo line of check will show your first initial and last name. If you have noted a specific designation for your QCD, this will be noted on the memo line of the check.

Name of charitable organization:\* \_\_\_\_\_

Specific designation for charitable distribution (maximum 25 characters): \_\_\_\_\_

Amount (\$100 or more):\* \_\_\_\_\_

Address:\* \_\_\_\_\_

Contact person/department: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email: \_\_\_\_\_

☐ I would like the donation to be made anonymously.

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Specific designation for charitable distribution (maximum 25 characters): \_\_\_\_\_

Amount (\$100 or more):\* \_\_\_\_\_

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Telephone number: \_\_\_\_\_

Email: \_\_\_\_\_

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### **Mailing of charitable contribution:**

The check is mailed directly to the charity reflecting your name and address. For charitable contribution amount \$50,000 or greater, the check will be mailed via overnight delivery with tracking service. TIAA will cover the \$12.00 fee associated with this service. You may request the following:

Mail the following checks directly to my address of record: \_\_\_\_\_

Overnight delivery service for checks less than \$50,000 - I would like the donation sent to the charity by overnight delivery. A \$12.00 fee will apply per unique location checks are sent to. The fee will be charged to my TIAA Trust taxable account or IRA account if no taxable account exists. Send the following checks via overnight delivery: \_\_\_\_\_

**Impact on your required minimum distribution (“RMD”):\***

Reduce my remaining RMD by the above charitable distribution gift for this year.

Next year, please reinstate the payment instructions on file before the gift was made.

By signing below, you understand and agree that (i) you are solely responsible for ensuring the accuracy and completeness of the information provided on this form, (ii) you are solely responsible for ensuring that your QCD complies with applicable requirements, including but not limited to Section 408(d)(8) of the Internal Revenue Code of 1986, as amended, (iii) TIAA Trust is entitled to rely, and will in fact rely, solely upon the information you have provided in making the distribution per your directions stated above, and (iv) in no event will TIAA Trust be liable for any adverse tax consequences, losses, costs, or damages of any nature or kind, whether direct, indirect, special, incidental, consequential or punitive, regardless of the legal or equitable theory of liability which you may assert, for making the distribution per your directions stated above.

Signed:\*

Printed name:\*

Dated:\*

Return this form to : TIAA Trust

211 North Broadway, Suite 1000  
St. Louis, MO 63102-2733

OR

If you have an online account, you can upload this document securely through the **TIAA.org** website or by using the TIAA mobile app.