

**REQUEST FOR A CHARITABLE DISTRIBUTION  
FROM AN INDIVIDUAL RETIREMENT ACCOUNT (IRA)**

**1. THE IRA OWNER'S PERSONAL INFORMATION**

First Name  Middle Initial

Last Name

Legal Street Address (no P.O. Boxes)

City  State  Zip Code

Mailing Street Address

City  State  Zip Code

Telephone Number  -  -

**2. THE IRA OWNER'S INSTRUCTIONS**

I direct TIAA-CREF, as trustee of my account listed below, to make a distribution(s) from my IRA directly to the charitable organization(s) listed in Section 4.

Check one:

Traditional       Roth IRA

Contract Number

I want the distribution(s) to qualify for exclusion from my gross income during the tax year below.

Tax Year

Therefore, the distribution(s) must be postmarked no later than December 31 of the year noted below:

Year

I want the distribution(s) to complete my required minimum distribution during the tax year noted below. In addition, no withholding for taxes should be taken from the distribution(s).

Tax Year

Please issue a check payable to each charitable organization listed on the next page and provide my name as the donor in connection with the distribution(s).

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F11185-0711-01

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### 3. THE IRA OWNER'S ACKNOWLEDGEMENTS AND SIGNATURE

I acknowledge that it is my responsibility to ensure the distribution(s) complies with the requirements of Sec. 1201 of the Pension Protection Act of 2006 and Sec. 408(d)(8) of the Internal Revenue Code of 1986, as amended. I assume full responsibility for any adverse tax consequences that may arise as a result of the distribution(s). I have consulted with my own tax advisor and understand the federal and state tax consequences of distribution(s). I have provided a current mailing address to the charitable organization(s). I understand that this is required in order for the charitable organization(s) to provide me with a proper receipt for my contribution. I further acknowledge that TIAA-CREF has not provided me with legal or tax advice about the distribution(s).

IRA Owner's Signature

Today's Date (mm/dd/yyyy)

 /  / 

### 4. CHARITABLE DISTRIBUTIONS

Please issue a check payable to each nonprofit organization listed below:

1. Name of Nonprofit Organization

Street Address



City

State

Zip Code

Attention

Amount of Check

\$

Source of Funds\*

If you want to list additional organizations, you may copy this page to indicate your instructions.

\* What investment choice(s) do you want to use to fund the distribution?

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\* What investment choice(s) do you want to use to fund the distribution?

## 4. CHARITABLE DISTRIBUTIONS (CONTINUED)

2. Name of Nonprofit Organization

Street Address

City

State

Zip Code

Attention

Amount of Check

\$

Source of Funds\*

3. Name of Nonprofit Organization

Street Address

City

State

Zip Code

Attention

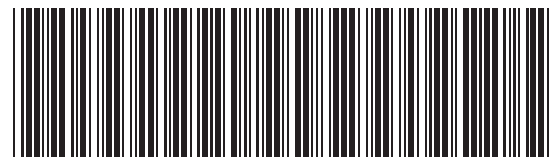
Amount of Check

\$

Source of Funds\*

Total Distribution to all organizations listed above: \$

TIAA-CREF cannot provide tax or legal advice; please consult your professional advisors.



F11185-0711-03