

In order to initiate a charitable distribution from your IRA, please complete this form, save a copy, send it to your provider and return a copy to Friends of SDPB.

IRA Provider Information:

Broker Name: _____

Broker Telephone: _____ Broker E-mail: _____

Re: Request for Charitable Distribution from Individual Retirement Account

Transfer from:

Account #: _____

Donor's Name (Please Print): _____

Amount: _____

It is my intention to have this transfer qualify during the _____ tax year. Therefore, it is imperative that this distribution be postmarked no later than December 31, _____.

Receiving Institution Information:

Friends of SDPB
PO Box 5000
Sioux Falls, SD 57117-5000

Friends of SDPB
Tax ID# 23-7310698

Donor(s) Information:

Name: _____ Phone Number: _____

Address: _____ Email Address: _____

City: _____ State: _____ Zip: _____

Please list my gift as anonymous

Designation:

Explore SD

Report SD

High School Activities

Education and Early Learning

SDPB Endowment

Membership Drive Matches

Where Needed Most

If you have any questions regarding this form please contact:

Friends of SDPB • friends@sdpb.org • 605-677-5861