

## REQUEST TO MAKE AN IRA DISTRIBUTION

Complete and submit this form <u>both</u> to your IRA Plan Trustee/Administrator and to the University of Wisconsin Foundation.

Tax ID: 39-0743975

1848 University Avenue Madison, WI 53726-4090

> 608-263-4545 800-443-6162 f: 608-263-0781

uwf@supportuw.org supportuw.org

IRA Plan Trustee or Administrator Name:	

Address:		
City:	State: Zip:	_
l wish to direct, a	this time, a distribution from my IRA. Please send	

## Address to mail your donation:

University of Wisconsin Foundation US Bank Lockbox 78807 Milwaukee, WI 53278-0807

## Address to mail or email the "Request to Make an IRA Distribution" form:

University of Wisconsin Foundation Attn: Gift Processing 1848 University Avenue Madison, WI 53726-4090 giftprocessing@supportuw.org

The University of Wisconsin Foundation is a publicly supported charitable organization qualified to receive such rollover distributions qualified under 501(c)(3), 509(a)(1) and 170(b)(1)(A)(iv). It is my intention that this gift comply with the "qualified charitable distribution" requirements of Section 408(d)(8) of the Internal Revenue Code.

In your transmittal letter to the University of Wisconsin Foundation or as a notation on the check, please include my name and address as the donor of record so that this distribution can be identified as a gift from me.

Donor signature:	Date:
Printed name:	<del>-</del>
Address:	
City:Sta	
Daytime phone:	
Last four digits of relevant account number	oer:
When received, this gift should be alloca	ted or used by the University of
Wisconsin Foundation for:	

I understand that a qualified charitable distribution cannot result in any quid-pro-quo benefits for me as the donor.

This form is provided for use in making a gift to the University of Wisconsin Foundation. It is not intended as legal or tax advice and is not a request or recommendation to make a distribution from your IRA.