Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Sterling College

Attn: Sheila Bird

125 W. Cooper Ave.

Sterling, KS 67579

Dear Sheila:

I have requested a qualified charitable distribution from my Individual Retirement Account payable to the Sterling College. My plan trustee/administrator is:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The distribution amount I have requested is $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I would like these funds to be designated as follows:

* This gift is unrestricted and may be used where the need is greatest at Sterling College
* I/we wish to specify that this gift be used for the following purpose(s):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It is my intent to comply with the requirements of H.R. 5771, the Tax Increase Prevention Act of 2014, which is legislation that extends the special IRA rollover incentive for gifts completed in 2014.

Accordingly, upon your receipt of payment from my plan trustee/administrator, please send me a written acknowledgement that states the amount of my gift, no goods or services were transferred to me by Sterling College in consideration for this gift, and that my gift will not be placed in a donor advised fund or supporting organization.

If you have questions, please contact me by phone: (\_\_\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Thank you for your attention to this request.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please print your name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Address: street, city, state, zip)

Thank you for your support of Sterling College. Please return this form to:

**Sterling College**

**Sheila Bird**

**125 W. Cooper Ave.**

**Sterling, KS 67579**

**Email: sbird@sterling.edu**