# **INSTRUCTIONS FOR DONATING FROM YOUR IRA** to the Archdiocese of Indianapolis and its ministries

Thank you for your support of a parish, school or agency of the Archdiocese of Indianapolis. In order to process your contribution in a timely and efficient manner, please complete the form below or use the online, secure form at <u>www.archindy.org/CCF</u>.

If you have any questions, please contact the Office of Stewardship and Development at <u>ccf@archindy.org</u>, 800-382-9836 ext. 1482, or 317-236-1482.

## STEP 1: REQUEST AN IRA ROLLOVER FROM CUSTODIAN

Submit a letter or online request to your IRA Custodian requesting to initiate an IRA charitable distribution. Many IRA Custodians have language or forms that they prefer you to use. Please visit your IRA Custodian's website for more specific instructions.

# **STEP 2: SUBMIT IRA CHARITABLE ROLLOVER INFORMATION TO THE ARCHDIOCESE**

Knowing the details of your gift allows us to apply the funds to your intended purpose. The information listed on the next page allows us, as the recipient, to fulfill your designation of the gift. Once all information is collected and funds received, we will transfer all funds associated with this gift to the designee and provide a gift acknowledgement for your contribution.

Note: If we do not receive proper notification of a gift, it will be placed into general fund at the Roman Catholic Archdiocese until identified.

## LETTER OF AUTHORIZATION

Please accept this letter as my authorization to irrevocably designate the funds/property received by the Roman Catholic Archdiocese of Indianapolis as stated below.

Donor contact inform	ation
Donor Name(s):	Phone number(s):
Donor Address:	
Donor Email Address:	
Purpose of the Funds	
My gift is to a	re for the benefit of the following ministry. Please provide additional sheets as needed. a parish – Parish Name General Parish Contribution (unrestricted and/or tithing) Restricted Parish Contribution – please provide further detail:
☐ My gift is to a	a school or agency – School/Agency Name General Contribution (unrestricted) Restricted School/Agency Contribution – please provide further detail:
	he Archdiocese of Indianapolis Jnited Catholic Appeal (UCA) Catholic Community Foundation Endowment Fund please provide fund name and/or fund number:
□ Other	
Other	

If the funds are for more than one ministry, please outline how much each ministry is to receive in the table below.

If the funds are to be used for more than one ministry, please outline the breakdown of the funds ( <i>i.e. Parish \$3,000; UCA \$500, Catholic Charities \$500</i> )	Gift Amount
TOTAL AMOUNT OF CHECK TO BE RECEIVED	\$

#### Administrator Details

IRA Trustee/Administrator: \_\_\_\_\_\_ Phone number: \_\_\_\_\_\_

Anticipated Date of Transfer: \_\_\_\_\_

### SIGNATURES

This is my/our written authorization to irrevocably transfer ownership of the assets specified in this form to the Roman Catholic Archdiocese of Indianapolis. I understand that any contribution, once accepted, represents an irrevocable contribution to the Roman Catholic Archdiocese of Indianapolis and is not refundable to me for any reason.

Donor Full Name (Please Print)