Owner/Donor

Address

City, State, Zip

IRA Administrator Company

Advisor's Name

Address

City, State, Zip

Dear Sir or Madam:

Please accept this letter as my request to make a direct charitable distribution from my Individual Retirement Account (IRA), Account # _____ . This distribution is intended to be an IRA Charitable Rollover as authorized by Section 408(d)(8) of the Internal Revenue Code.

Please issue a check in the amount of $ _____ payable to Four Seasons. Four Seasons is a 501(c)3 organization and is a qualified charitable recipient for this transfer. It is my intention to have this transfer be a Qualified Charitable Distribution that will qualify for exclusion from my taxable income during the 20 ____ tax year. Four Seasons tax ID number is: 56-1252665.

Please mail the check to the following address:

Four Seasons Foundation
211 N. Main Street
Hendersonville, NC 28732

Important: In your transmittal to Four Seasons, please indicate my name and address as the donor of record in connection with this transfer, and please copy me on your transmittal.

If you have any questions, I can be reached at _____
Phone Number

Sincerely,

Donor printed name