



## **IRA Charitable Rollover**

(also called Qualified Charitable Distribution)

If you are aged 70.5+, you can have an instant impact on the lives of those affected by oral health complications. At the same time, your gift of an IRA Charitable Rollover may also provide you with a tax break.

- **How does it work?**  
Individuals who are aged 70.5 years and older are required to take a minimum distribution from their IRA. This distribution becomes taxable income if the IRA owner receives it. However, the owner can designate that the distribution be directly transferred to Dientes Community Dental Care. This will lower their adjusted gross income, reducing their tax burden.
- **How much can I transfer?**  
You may transfer any amount up to \$100,000 per year, total. This amount can come from any and all IRA accounts you have.
- **How do I make an IRA Charitable Rollover?**  
To make your gift, contact your IRA administrator and provide them with our Tax ID number: 77-0311752. A sample authorization letter to send to your IRA administrator is available below.

To learn more about how to make an IRA Charitable Rollover to Dientes Community Dental Care or if you have any questions, please contact us at: 831-464-5421 or email [development@dientes.org](mailto:development@dientes.org)

Thank you for your generous gift to Dientes.  
Once we have received a statement confirming the IRA Charitable Rollover,  
you will receive a confirmation of your contribution.

Dientes is recognized by the IRS as a 501(c)(3) organization, tax ID: 77-0311752.

**Sample Letter: Request from IRA Plan Owner to IRA Administrator**

[Date]

[IRA Administrator Name]  
[IRA Administrator Address]

Re: Request for IRA Charitable Rollover to Dientes Community Dental Care

Dear Sir or Madam:

Please accept this letter as my request to make a direct charitable distribution from my Individual Retirement Account # \_\_\_\_\_.

Please issue a check in the amount of \$\_\_\_\_\_ [not to exceed \$100,000] payable to Dientes Community Dental Care (tax ID: 77-0311752) at the address below:

Dientes Community Dental Care  
1830 Commercial Way  
Santa Cruz, CA 95065

In your transmittal to Dientes Community Dental Care, please give my name and address as the donor of record in connection with this transfer. Please copy me on your transmittal.

It is my intention to have this transfer qualify for exclusion for the 20\_\_ tax year. Therefore, it is imperative that this distribution be postmarked no later than December 31, 20\_\_.

If you have any questions or need to contact me, I can be reached at \_\_\_\_\_ [provide telephone number or email address].

Thank you for your assistance in this matter.

Sincerely,

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[Your Name, IRA Plan Owner]  
[Your Address]