



WE ARE NEW YORK'S LAW SCHOOL

IRA Qualified Charitable Distribution Form

Date: _____

For Donor to Complete

Name of IRA Administrator: _____

Address: _____

City: _____ State: _____ ZIP: _____ Country: _____

I request a charitable distribution from my individual retirement account No. _____.

Please issue a check in the amount of \$ _____ payable to "New York Law School."

Use of gift: ☐ NYLS annual fund ☐ Student scholarships ☐ Other: _____
Please specify gift designation

Name: _____ Signature: _____

Please list your name as you would like it to appear in NYLS's Honor Roll of Donors.

☐ I wish to remain anonymous.

Note for IRA Administrator

When you send the check to NYLS, please indicate my name and address as the donor of record, and please send a copy of the letter to my attention. I intend to have this distribution to NYLS qualify for exclusion during the 2024 tax year. Please be sure to have the distribution issued and postmarked before December 31, 2024.

Please mail the check to:

New York Law School
Office of Institutional Advancement
185 West Broadway
New York, NY 10013

cc: Office of Institutional Advancement
New York Law School
185 West Broadway
New York, NY 10013
T 212.431.2800
E alumni@nyls.edu