QUALIFIED CHARITABLE DEDUCTION (QCD) PLEDGE FORM – Please print

I, _____, birthdate_____
Full legal name (Please print)

Home address _____
Street name/number City State Zip code

Email address._____Telephone number _____

wish to make my donation to Main Street Community, 1003 North Main Street, Edwardsville, IL 62025, in the amount of _____Dollars ($_____) by taking a Qualified Charitable Deduction (QCD) from my traditional IRA for tax year 2025. I shall direct the Plan Administrator of my IRA to send the QCD in the amount of $_____ to Main Street Community Center at the address stated herein, by December 31, 2025, or such other later date as permissible by law. Further, I understand that should I not be eligible or no longer wish to take a QCD as stated herein, then I shall be liable for the donation amount stated above of $_____ and shall pay this amount directly to Main Street Community Center by December 31, 2025.

DATED this _____ day of _____, 2025, at Edwardsville, IL, Madison County, Illinois.

_____
Signature