

# ➤ **BNY** | INVESTMENTS **KEOGH PLAN TRANSFER REQUEST FORM**

Please complete this form if you wish to transfer or directly roll over all or a portion of your current IRA, Qualified Plan (including 401(k) Plan), governmental 457(b) Plan or 403(b)(7) Plan to your Keogh Plan Account. BNY will contact your current plan administrator/trustee/custodian with instructions on how to deposit the assets into your current account. If this is a new Keogh Plan Account, please attach a completed Keogh Plan Enrollment Form.

## 1. PARTICIPANT INFORMATION

|                                    |              |                   |               |
|------------------------------------|--------------|-------------------|---------------|
| Name (first, middle initial, last) |              |                   | Date of Birth |
| Address                            | City         | State             | Zip           |
| Social Security #                  | Phone Number | Cell Phone Number |               |
| Employer Sponsor of Keogh          |              |                   |               |

## 2. INFORMATION REGARDING ACCOUNT TO BE TRANSFERRED

Please provide the following information about your current trustee or custodian and your current retirement account.

|   |              |       |     |
|---|--------------|-------|-----|
| Name of Institution Currently Holding Your IRA, Qualified Plan (e.g. 401(k) Plan), Governmental 457(b) Plan or 403(b)(7) Plan Account |              |       |     |
| Address   | City         | State | Zip |
| Current IRA or Plan Account #   | Phone Number |       |     |

Please check the box indicating the source of your retirement funds you wish to transfer or directly roll over. *(Please be sure that the information here is consistent with Section 3).*

- ☐ Traditional (Regular) IRA      ☐ Rollover IRA      ☐ SEP-IRA      ☐ Qualified Plan (e.g. 401(k) Plan), Governmental 457(b) Plan or 403(b)(7) Plan

## 3. TRANSFER INFORMATION

Please check the box that applies to the type of transaction you are requesting:

- ☐ **Direct Transfer.** I authorize the Trustee/Custodian of my Keogh plan to directly transfer the assets to my Keogh Plan Account.

Please transfer ☐ All (100%) or ☐ a part \$\_\_\_\_\_ or \_\_\_\_\_% of the account listed in Section 2 to my Keogh Plan Account. All amounts transferred must be in **cash**.

- ☐ **Direct Rollover Qualified Plan (e.g. 401(k) Plan), Governmental 457(b) Plan or 403(b)(7) Plan Direct Rollover.** I authorize the Plan Administrator/Trustee/Custodian of my IRA, Governmental 457(b) Plan or 403(b)(7) Plan to directly rollover the proceeds of my eligible rollover distribution directly to my Keogh Plan Account.

Please transfer ☐ All (100%) or ☐ a part \$\_\_\_\_\_ or \_\_\_\_\_% of the account listed in Section 2 to my Keogh Plan Account. All amounts transferred must be in **cash**.

Please check the appropriate box:

- ## 5. PARTICIPANT SIGNATURE

Signature

Date \_\_\_\_\_

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Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Contact the resigning custodian/trustee to determine if needed.

If required, your signature should be guaranteed as described below:

## MAILING INSTRUCTIONS

Please mail this form to:

BNY Shareholder Services  
P.O. Box 534434  
Pittsburgh, PA 15253-4434

For registered, certified or overnight mail:

BNY Shareholder Services  
Attention: 534434  
500 Ross Street, 154-0520  
Pittsburgh, PA 15262

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