Tax Qualified Transfer Request



To bring funds to NASA Federal

Use this form only if you have the specified tax qualified account open with NASA FCU. Need to open an IRA? Please contact us for assistance, 888-NASA FCU.

PART 1. NASA FCU ACCOUNT HOLDER Individual requesting the transfer			
NASA FCU Account Number	ACCOUNT TYPE (Select one):	SEP IRA	
Name (First/M.I./Last)	Social Security Number Date of Birth		
Phone	Email Address		
PART 2. CURRENT IRA TRUSTEE OR CUSTODIAN Tell us about your account at your other institution			
Account Number	ACCOUNT TYPE (Select one):		
Name of Financial Institution	Address		
City/State/ZIP	Phone	Fax Number	
PART 3. TRANSFER INSTRUCTIONS Complete all that apply:			
Partial Transfer Amount	r to Maturity* Transfer Date*I acknowledge penalties and/or fees that may be charged by current institution ial Transfer Amount		
PART 4. REQUIRED MINIMUM DISTRIBUTION (RMD) INSTRUCTIONS* For IRA/SEP owners subject to annual distributions as per IRS requirements			
(Select one):			
I would like my RMD funds paid to me prior to sending funds to NASA FCU.			
I would like my current institution to hold any current year RMD amount(s) and pay them to me at a later date			

Transfer all funds (including RMD). I will be responsible for satisfying RMD amount(s).

PART 5. SIGNATURES

I authorize the transfer of these tax qualified assets and certify that all information provided by me is true and accurate. I understand that I am responsible for determining that this tax qualified transfer qualifies under the rules that apply to such transfers and agree to comply with those rules. I understand that special rules apply to SIMPLE IRA to Traditional IRA transfers. I assume responsibility for any consequences that may result from this transfer. I understand that I am solely responsible for satisfying RMD amount(s) if applicable to these funds. If/when RMDs do apply, my failure to select an option above does not transfer this responsibility to NASA FCU. I agree that NASA FCU is not responsible for any consequences that may arise from executing this transfer request.

The custodian signing below agrees to accept the assets being transferred.

 Signature of NASA FCU IRA Account Owner
 Date (mm/dd/yyyy)

 Notary Public/Signature Guarantee (if required by the current institution)
 Date (mm/dd/yyyy)

NASA FCU Authorized Signature (Accepting Custodian)

Date (mm/dd/yyyy)

Instructions to Complete Your Request

- 1. Complete the form in its entirety and physically sign under Signatures. Please obtain Notary or Signature Guarantee if your current institution requires it to release your funds.
- 2. Return Form by:

Mail:	Overnight/Expedited:	Standard Mail:
	NASA Federal Credit Union	NASA Federal Credit Union
	Attn: Specialty Accounts	Attn: Specialty Accounts
	500 Prince Georges Blvd	P.O. Box 1588
	Upper Marlboro, MD 20774	Bowie, MD 20717-1588

Online Banking: Log into Online Banking to send a secure message. In the top right, next to profile, click the message icon. Click "compose" then "attach files" option in the message center to attach a copy of the form and photo ID.

Mobile Banking App: Log into the Mobile App to send a secure message. In the bottom right, click "more." Click message center, click "compose" then "attach files" option in the message center to attach a copy of the form and photo ID.

Fax: Specialty Accounts 301-390-4525