KEELEY FUNDS

INDIVIDUAL RETIREMENT ACCOUNT DISTRIBUTION REQUEST FORM

For assistance, please call 800-422-3554

1. WHOSE IRA IS THIS?					
Name		Date of Birth			
Street	City	State	Zip Code		
Fund Name	Account Number	Phone Number			
2. TYPE OF DISTRIB	UTION				
Premature Distribution: Permanent Disability: Excess Contribution: Ren	account and reapply as a current year contrib	d. e excess date of the contribution was ution ied and I am the beneficiary. Date of De	and for the		
3. METHOD OF DISTR	RIBUTION				
option, do no select a payme Required Minimum Distr	ains: Note: This option is only available if you ent frequency in section 4 of this form. ibution ibution Based on the Joint Life Expecta	-			
4. PAYMENT FREQUE	ENCY				
Annually, (specify month a	y month and date): arch, June, September, and December (specify		domption will account the		

Note: Unless specified above, periodic redemptions will be made on the 15th day of the month. If the date falls on a weekend or holiday, your redemption will occur on the next business day. If the next business day falls in the next month, the redemption will cycle on the previous business day. If payment frequency of annually is selected and no month is listed, redemption will be made in December.

5. PAYMENT INSTRUCTIONS					
Please send distribution to:					
Shareholder: Check will made payable to shareholder: Deposit to a KEELEY Fund Account: Existing Taxable Account: Fund and Account Now Taxable Account (attach a completed Account Now IRA (for an Inherited IRA or an IRA due to Bank of Record: Proceeds will be sent via ACH (attach a complete Now IRA)	lumber ount Application). Yo divorce). The benefi (Automated Clearing	our name must be listed in the registration iciary's name must be listed in the regist House) to our bank of record. There is no	tration of the new IRA. o fee for this service. If		
you wish to have the proceeds sent to banking insta signature notarized in Section #7.	_	,	,		
Overnight Mail: A \$15.00 fee will be taken in add your address of record.	ition to redemption p	proceeds. Unless otherwise indicated bel	ow, the check will be sent to		
Special-use Name and Address as indicate	d below: Medallion	Signature Guarantee required in Section	ı #8.		
Name					
Street City		State	Zip Code		
6. TAX WITHHOLDING					
Please select one:					
I elect not to have federal income tax withheld from	n my distribution.				
I elect to have % federal income tax withheld from my distribution (must be 10% or greater).					
In addition to the above percentage, I elect to have	\$ fed	eral income tax withheld from my distrib	ution.		
Important State Tax withholding Information: We will distribution, your address of record is within a mandato requirement is independent of federal withholding. Coninformation.	ory withholding state	e and you have federal income tax withh	eld, or if the state's		
Note: If no withholding election is indicated above, IRS regulations reaccountant or tax advisor regarding your IRA distributions. Even if yo portion of your distribution. You may be subject to tax penalties under	u elect not to have federa	l income tax withheld, you are liable for payment o	of federal income tax on the taxable		
7. SIGNATURE					
I, the undersigned, authorize and request that I account listed in Section 1. I acknowledge that consequences of these distribution(s). I undersequirement is met each year for my traditiona agree to indemnify and hold KEELEY Funds, Botheir directors, trustees, employees, and agents a result of the information and instructions I have	the box checked stand that I am re I IRA and that fai oston Financial Da harmless in this re	in Section 2 is correct, and I am a esponsible for determining that tl lure to meet this requirement may ita Services, Inc., UMB Bank, and a	ware of the possible ta he minimum distribution result in tax penalties. ny affiliate and/or any o		
X		Data			
Signature		Date			
MEDALLION GUARANTEED BY:		NOTARY PUBLIC BY:			

A Medallion Signature Guarantee is required if the proceeds check is to be made payable or mailed to a party other than the shareholder of record or if the redemption amount exceeds \$25,000.