PD F 5179 E Department of the Treasury Bureau of the Public Debt (Revised May 2011)



OMB No. 1535-0069

www treasurydirect gov

ACCOUNT NAME

First-Named

Owner

TAXPAYER IDENTIFICATION NUMBER (IF AVAILABLE)

Social Security Number

SECURITY TRANSFER REQUEST

Identify the

Employer Identification Number

TreasuryDirect account to which you want your securities transferred.

800-722-2678			INK ONLY - NO ALTERATI	ONS OR CORRECTION	IS
1. Legacy Treasury Dire		FOR DEPARTMENT USE			
Legacy Treasury Direc	t ACCOUNT NUME	BER:			
ACCOUNT NAME					DOCUMENT AUTHORITY
					APPROVED BY
					DATE APPROVED
2. SECURITIES IDENTIF	ICATION AND AMO	OUNT CHECK TH	HE BOXES WHICH APPLY AT	ND PROVIDE THE INFOR	MATION REQUESTED.
	WARNING: All sci	heduled reinvestm	ents will be cancelled	at the time of trans	sfer.
Transfer ALL my secu	urities for the above	Legacy Treasury D	irect account.		
Transfer my securities	s totaling \$	fron	n the CUSIPs below. (A	Additional forms are rec	quired for more than 10 CUSIPs.)
CUSIP	AMOUNT	Department Use Reference Number	CUSIP	AMOUNT	Department Use Reference Number
\$,			\$	
\$				<u> </u>	
\$					
 \$					
 \$					
Transfer \$ (If you are NOT transferring below. This information is SUB-ACCOUNT \$	ng all of your holdings s shown on your Lega AMOUNT	for this CUSIP, you m	nust also list the specific su	- ub-accounts and amour SUB-ACCOUNT	AMOUNT \$
3. TRANSFER INSTRUC	TIONS CHECK ONE	BOX ONLY AND PROV	IDE THE INFORMATION REC	QUESTED FOR THE TRA	NSFER.
			ry Direct ACCOUNT N	UMBER	
Legacy Treasury Direct	t ACCOUNT NUME	BER			
ACCOUNT NAME					
					Identify the Legacy Treasury Direct account
					to which you want your
				<u> </u>	securities transferred.
TAXPAYER IDENTIFIC	CATION NUMBER	(IF AVAILABLE)			
First-Named	Social Soci	rity Number	OR	or Identification Numbe	<u></u>
Owner TO A		ONLINE Treasury	Direct ACCOUNT NUM	er Identification Numbe	!
TreasuryDirect ACCOL		ONLINE HEASULYI	SHEEL ACCOUNT NOW		l at www.treasurydirect.gov.)

OR

EXTERNAL TRANSFER TO A FINA	NCIAL INSTITUTIO	N (Before completing,	see instructior	ns.)				
ROUTING NUMBER:								
FINANCIAL INSTITUTION WIRE NAME:								
ACENT/DDOVED NAME.								
AGENT/BROKER PHONE NUMBER:								
SPECIAL HANDLING INSTRUCTIONS:								
	YOU MUST WAIT UNTIL YOU ARE IN THE PRESENCE OF A CERTIFYING INDIVIDUAL TO SIGN THIS FORM. IF THERE ARE TWO OWNERS JOINED BY THE WORD "AND," BOTH MUST SIGN.							
I/We submit this transfer request pursuant to the provisions of Department of the Treasury Circulars, Public Debt Ser (31 CFR Part 357) and 1-93 (31 CFR Part 356). I/We understand all scheduled reinvestments will be cancelled at the transfer.								
Under penalties of perjury, I/we certify that	t the information pro	vided on this form is tru	e, correct, and	d complete.				
Signature		Title (i						
Signature		Title (i						
	Address			Telephone (Daytime)				
Instructions to Certifying Individual: 1. Name of person(s) who appeared and c 2. Medallion stamps require an original sig 3. Person(s) must sign in your presence.	date/place of appeara	ince MUST be completed	l.					
I certify thatName(s) of Person	on(s) Who Appeared	, who	se identity(ies)	is/are known or proven to me,				
personally appeared before me this	day of	Month / Year	_ at	City / State				
and signed this request.								
		Signature and Title of Certifying Individual						
		Name of F	Financial Instituti	ion				
ACCEPTABLE CERTIFICATIONS: Financial Institution's Official Seal or Stamp (such as Corporate Seal, Signature Guarante Stamp, or Medallion Stamp). Brokers must	ed	Address						
use a Medallion Stamp.		City / State / ZIP Code						
		ו	elephone					
Certi	ification by a No	tary is NOT Accepta	able.					

2

PD F 5179 E

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INSTRUCTIONS FOR COMPLETING A SECURITY TRANSFER REQUEST

PURPOSE

You may use this form to request the **transfer of securities** from a Legacy Treasury Direct account to:

- another Legacy Treasury Direct account, or
- an online TreasuryDirect account, or
- a designated account at a financial institution.

IMPORTANT NOTICES

- All scheduled reinvestments will be cancelled at the time of transfer.
- This form must be signed. Only original signatures and forms will be accepted (stamped signatures are not acceptable).
- Unless all the required information is provided legibly, there may be a delay in processing your request. To avoid delays, read the instructions carefully and **print clearly in ink only.** Where spaces are provided, enter only one number in each space.
- TRANSFER REQUESTS WILL NOT BE ACCEPTED WITH ALTERATIONS OR CORRECTIONS.

1. Legacy Treasury Direct ACCOUNT INFORMATION

Print your Legacy Treasury Direct ACCOUNT NUMBER and the ACCOUNT NAME (registration) as stated on your Legacy Treasury Direct STATEMENT OF ACCOUNT.

2. SECURITIES IDENTIFICATION AND AMOUNT

Check the boxes which apply and provide the information requested. ALL REQUIRED INFORMATION IS LISTED ON YOUR Legacy Treasury Direct *Statement of Account*.

To transfer ALL the securities in the Legacy Treasury Direct account listed in Section 1, check the first box.

To transfer one or more securities in your Legacy Treasury Direct account, check the second box, enter the total dollar amount of the securities being transferred, and list the CUSIP numbers and amounts.

AMOUNT - The total par for the CUSIP.

CUSIP - The number (for example, 912795XXX) that identifies the securities to be transferred (located under the heading "Security" on your *Statement of Account*).

To transfer a portion of one security in your Legacy Treasury Direct account, check the third box, enter only the amount being transferred, and list the CUSIP number. To transfer security sub-account(s), enter the sub-account number(s) and dollar amount(s) to be transferred. THE AMOUNT TO BE TRANSFERRED AND THE AMOUNT REMAINING IN THE CUSIP MUST SATISFY BOTH THE MINIMUM AND MULTIPLE HOLDING REQUIREMENTS FOR THE SECURITY.

3. TRANSFER INSTRUCTIONS

(Choose One Option Only)

INTERNAL TRANSFER TO ANOTHER Legacy Treasury Direct ACCOUNT

Check the box to transfer your securities to another Legacy Treasury Direct account number. Please note: All scheduled reinvestments will be cancelled at the time of transfer.

- Legacy Treasury Direct ACCOUNT NUMBER Enter the number of the account to which the securities are being transferred.
- ACCOUNT NAME Enter the ACCOUNT NAME (registration) as shown on the transferee's Statement of Account.
- TAXPAYER IDENTIFICATION NUMBER If available, enter the TAXPAYER IDENTIFICATION NUMBER used on the
 account to which the securities are to be transferred.

TRANSFER TO AN ONLINE TreasuryDirect ACCOUNT

Check the box to transfer your securities to an online TreasuryDirect account number. Please note: All scheduled reinvestments will be cancelled at the time of transfer.

- TreasuryDirect ACCOUNT NUMBER Enter the number of the account to which the securities are being transferred. If a new account has not yet been established, you can establish one at www.treasurydirect.gov.
- ACCOUNT NAME Enter the ACCOUNT NAME (registration) as shown on the online TreasuryDirect account.
- TAXPAYER IDENTIFICATION NUMBER If available, enter the TAXPAYER IDENTIFICATION NUMBER used on the
 account to which the securities are to be transferred.

3 PD F 5179 E

EXTERNAL TRANSFER TO A FINANCIAL INSTITUTION

Check the box to transfer your securities to a financial institution for safekeeping or sale. Contact the financial institution for their "Book-Entry" delivery instructions. Please note: Securities CANNOT be transferred to a checking or savings account. Provide the following information:

- ROUTING NUMBER ABA (identification) number of the financial institution receiving the securities.
- FINANCIAL INSTITUTION WIRE NAME Provide the financial institution's "Book-Entry" delivery instructions. Instructions include the receiving bank's name and safekeeping account number OR the receiving bank's name and the brokerage firm's name (these must be in the approved telegraphic abbreviation "short" form).
- AGENT/BROKER NAME
- AGENT/BROKER PHONE NUMBER
- SPECIAL HANDLING INSTRUCTIONS The customer name and account number at the financial institution for delivery of securities; any other instructions required by your financial institution.

Examples: To a financial institution for safekeeping:

To a financial institution for transfer to a brokerage firm:

Routing Number: Financial Institution Wire Name: Special Handling Instructions:

XXXXXXXX ABC BK/TRUST

FURTHER CREDIT TO JOHN DOE TRUST ACCOUNT NUMBER XXXXXX

Routing Number: XXXXXXXXX ABC/CUST/BRKG Financial Institution Wire Name:

FURTHER CREDIT TO JOHN DOE BROKERAGE ACCOUNT NUMBER XXXXXX Special Handling Instructions:

4. AUTHORIZATION

Sign the request in the presence of an authorized certifying individual. Identification may be required. Remember, if there are two owners joined by the word "and," both must sign (for example, John Doe and Mary Doe). Please provide an address and daytime telephone number (including area code) where you may be contacted if there are questions about this transfer.

Certification of your signature is required. Acceptable certifying individuals include authorized employees of insured depository institutions and corporate central credit unions. Brokers must use a medallion stamp. Certification date and address of financial institution or broker is required. Please note: Certification by a notary public is NOT acceptable.

Sample certification for a financial institution:

Acceptable certification for a brokerage:

SIGNATURE GUARANTEED **ABC National Bank** Hillview Branch

Authorized Signature

SIGNATURE GUARANTEED MEDALLION GUARANTEED Generic Brokerage

Authorized Signature XXXXXXXX SECURITIES TRANSFER AGENTS MEDALLION PROGRAM

[Bar Code]

WHERE TO SEND

Please mail your form to the appropriate address below.

• If requesting a transfer to another Legacy Treasury Direct account or to a financial institution:

Treasury Retail Securities Site, PO Box 9150, Minneapolis, MN 55480-9150

• If requesting a transfer to an online TreasuryDirect account:

Bureau of the Public Debt, PO Box 7015, Parkersburg, WV 26106-7015

This form must be received at least ten business days in advance of:

- the maturity date of the security to ensure processing, and
- an interest payment date for the security to ensure processing prior to that date.

CONTACT

Call us toll-free in the United States at 800-722-2678. Outside the U.S.? Call us at 304-480-6464.

CONFIRMATION OF THE TRANSFER

You will receive a Legacy Treasury Direct Statement of Account after your securities have been transferred. Under certain circumstances, there may be a hold on the account and a statement won't be mailed.

NOTICE UNDER THE PRIVACY ACT AND PAPERWORK REDUCTION ACT

The collection of the information you are requested to provide on this form is authorized by 31 U.S.C. Ch. 31 relating to the public debt of the United States. The furnishing of a Social Security Number, if requested, is also required by Section 6109 of the Internal Revenue Code (26 U.S.C. 6109).

The purpose of requesting the information is to enable the Bureau of the Public Debt and its agents to issue securities, process transactions, make payments, identify owners and their accounts, and provide reports to the Internal Revenue Service. Furnishing the information is voluntary; however, without the information Public Debt may be unable to process transactions.

Information concerning securities holdings and transactions is considered confidential under Treasury regulations (31 CFR, Part 323) and the Privacy Act. This information may be disclosed to a law enforcement agency for investigation purposes; courts and counsel for litigation purposes; others entitled to distribution or payment; agents and contractors to administer the public debt agencies or entities for debt collection or to obtain current addresses for payment; agencies through approved computer matches; Congressional offices in response to an inquiry by the individual to whom the record pertains; as otherwise authorized by law or regulation.

We estimate it will take you about 10 minutes to complete this form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. Any comments or suggestions regarding this form should be sent to the Bureau of the Public Debt, Forms Management Officer, Parkersburg, WV 26106-1328. **DO NOT SEND** completed form to this address; send to the appropriate address shown in "WHERE TO SEND" in the Instructions.

PD F 5179 E