Department of the Treasury Bureau of the Public Debt (Revised July 2008)

www.treasurydirect.gov 1-800-722-2678



SECURITY TRANSFER REQUEST

SEE INSTRUCTIONS -TYPE OR PRINT IN INK ONLY - NO ALTERATIONS OR CORRECTIONS

1. Legacy Treasu	ry Direct ACCOUNT IN	FORMATION			FOR DEPARTMENT USE	
Legacy Treasury						
ACCOUNT NAME					DOCUMENT AUTHORITY	
					APPROVED BY	
					DATE APPROVED	
2. SECURITIES II	DENTIFICATION AND A	MOUNT CHECK THE	BOXES WHICH APPLY A	ND PROVIDE THE INFORM	MATION REQUESTED.	
WARNING: All scheduled reinvestments will be cancelled at the time of transfer. Transfer ALL my securities for the above Legacy Treasury Direct account.						
Transfer my securities totaling \$ from the CUSIPs below. (Additional forms are required for more than 10 CUSIPs.)						
CUSIP	AMOUNT	Department Use Reference Number	CUSIP	AMOUNT	Department Use Reference Number	
	\$			\$	-	
	\$			\$	_	
	\$			\$		
	\$			\$		
	·					
	\$			\$		
(If you are NOT trar	of usferring all of your holdings shown on your Legacy Treas AMOUNT \$	for this CUSIP, you must	also list the specific sub			
3. TRANSFER INSTRUCTIONS CHECK ONE BOX ONLY AND PROVIDE THE INFORMATION REQUESTED FOR THAT TRANSFER.						
☐ INTERNAL TRANSFER TO ANOTHER Legacy Treasury Direct ACCOUNT NUMBER						
Legacy Treasury	Direct ACCOUNT NUMB	ER		(May be left blank		
ACCOUNT NAME	<u> </u>			Request {PD F 518	32} is attached.)	
					Identify the	
					Legacy Treasury Direct account to which you	
					want your securities transferred.	
TAXPAYER IDENTIFICATION NUMBER (IF AVAILABLE)						
First-Named Owner —	Social Security Number	OR	loyer Identification Number			
	·	·				
	R TO AN ESTABLISHE	ED ONLINE Treasur	yDirect ACCOUN	T NUMBER		
TreasuryDirect ACCOUNT NUMBER (May be established at www.treasurydirect.gov.)						
ACCOUNT NAME						
					Identify the TreasuryDirect account to which you want your securities transferred.	
First-Named	ITIFICATION NUMBER (IF AVAILABLE) OR		•	,	
Owner —	Social Security Number		yer Identification Number	_		

☐ EXTERNAL TRANSFER TO A FINA	NCIAL INSTITUTION (Before completing, see instruc	tions.)		
ROUTING NUMBER:				
FINANCIAL INSTITUTION WIRE NAME:				
AGENT/BROKER NAME:				
AGENT/BROKER PHONE NUMBER:				
SPECIAL HANDLING INSTRUCTIONS:				
SEE INSTRUCTION	IS FOR PRIVACY ACT AND PAPERWORK REDUCTION ACT NOTICE	:		
	YOU ARE IN THE PRESENCE OF A CERTIFYING INDIVIDUAL TO SIGNEWORD "AND," BOTH MUST SIGN.	IN THIS FORM. IF THERE ARE TWO		
	the provisions of Department of the Treasury Circulars I/We understand all scheduled reinvestments will be ca			
Under penalties of perjury, I/we certify that the	information provided on this form is true, correct, and co	mplete.		
Signature	Title (if appropriate)	_		
Signature	Title (if appropriate)	_		
Instructions to Certifying Individual:	and date/place of appearance MUST be completed.			
I certify that	, whose identity(ies) is/are	known or proven to me,		
personally appeared before me thisand signed this request.	day of at at	City/State		
ACCEPTABLE CERTIFICATIONS: Financial Institution's Official Seal or Stamp (such as Corporate Seal,	Signature and Title of Certifying Inc	Signature and Title of Certifying Individual		
Signature Guaranteed Stamp, or Medallion Stamp). Brokers must use a Medallion Stamp.	Name of Financial Institution	Name of Financial Institution		
	Address			
	City/State/ZIP Code			
Constitu	Telephone Figation by a Notary is NOT Associable			
Centi	fication by a Notary is NOT Acceptable.			

PD F 5179 Department of the Treasury Bureau of the Public Debt (Revised July 2008)

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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. If a new account has not yet been established, please leave the ACCOUNT NUMBER blank and include a completed New Account Request (PD F 5182).
- ACCOUNT NAME Enter the ACCOUNT NAME (registration) as shown on the transferee's Statement of Account or, in the case of a new account, on the New Account Request (PD F 5182).
- 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.

EXTERNAL TRANSFER TO A FINANCIAL INSTITUTION (continued on next page)

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

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

BROKERAGE ACCOUNT NUMBER XXXXXX

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.

5. CERTIFICATION

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 MEDALLION GUARANTEED Generic Brokerage

SIGNATURE GUARANTEED ABC National Bank Hillview Branch

Authorized Signature XXXXXXXX

SECURITIES TRANSFER AGENTS MEDALLION PROGRAM

[Bar Code]

Authorized Signature

SUBMISSION

Completed forms requesting a transfer to an Internal or External account should be submitted to your Treasury Retail Securities Site. You can find the Legacy Treasury Direct® address on your Statement of Account or on the web (www.treasurydirect.gov).

Completed forms requesting a transfer to an online TreasuryDirect account must be sent to:

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 1-800-722-2678. 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 AND PAPERWORK REDUCTION ACTS

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 entitles 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 the above address; instead, submit completed form in the manner described previously under SUBMISSION.