

For official use only:

Customer Name

Customer No.

PD F 5446 E  
 Department of the Treasury  
 Bureau of the Public Debt  
 (Revised April 2009)

**TreasuryDirect®**

**OFFLINE TRANSACTION REQUEST**

OMB No. 1535-0138

[www.treasurydirect.gov](http://www.treasurydirect.gov)  
 304-480-7711

**IMPORTANT: Follow instructions in filling out this form. You should be aware that the making of any false, fictitious, or fraudulent claim or statement to the United States is a crime that is punishable by fine and/or imprisonment.**

**PRINT IN INK OR TYPE ALL INFORMATION**

Use this form to request transactions involving online E, EE, and I savings bonds, and Treasury bills, notes, bonds, and TIPS, and/or a TreasuryDirect account, which cannot be completed online. If a:

- **Decedent's estate is involved, see the instructions for examples of when this form may or may not be used.**
- **Change to an Entity Account or Entity Account Manager is involved, see the instructions for additional evidence that may be required.**

**Carefully read all of the instructions before completing this form and complete only the parts of the form that apply to the transaction(s) requested. Parts A and F must be completed for ALL transactions.**

**At a glance.....**

<b>If you are the.....</b>	<b>and are requesting.....</b>	<b>then complete parts</b>	<b>and also provide this evidence:</b>
Account owner or parent of a minor account owner	Change/correct account name	A, E-1, and F	None required
	Correct Social Security Number	A, E-1, and F	
	Correct date of birth	A, E-1, and F	
	Remove hardlock	A and F	
Account owner or parent of a minor account owner and the security is a restricted, converted security	Transfer	A, C, and F	If the non-converting coowner or beneficiary is deceased, a certified copy of his/her death certificate
	Edit	A, D-1, and F	
Surviving secondary owner or beneficiary, including non-converting coowner or beneficiary	Redemption or sale	A, B, and F	A certified copy of the decedent's death certificate
	Transfer	A, C, and F	
Non-converting coowner or beneficiary	Edit registration	A, D-1, and F	None required
Legal representative or legal guardian formally appointed by the court and still acting	Redemption or sale	A, B, and F	A certified copy of your letters of appointment, dated within one year of submission
	Transfer to a TreasuryDirect Entity Account, financial institution, or broker	A, C, and F	
Person entitled to securities due to distribution of an estate by a legal representative or restoration to competency or attainment of majority when a legal guardian has been formally appointed	Redemption or sale	A, B, and F	A certified copy of the legal representative's or legal guardian's letters of appointment dated within one year of submission, certified copies of death certificates for all deceased registrants, and a PD F 1455 showing distribution.
	Transfer to person(s) entitled	A, C, and F	
Attorney-in-fact	Redemption or sale	A, B, and F	A copy of the power of attorney document, containing the grantor's signature and witnessed or certified in accordance with applicable state law
	Transfer	A, C, and F	
	Edit registration	A, D-1, and F	
	Change/correct account name	A, E-1, and F	
	Correct Social Security Number	A, E-1, and F	
	Correct date of birth	A, E-1, and F	

Person(s) entitled through judicial proceedings	Redemption or sale	A, B, and F	A certified copy of the court approved document authorizing the transaction
	Transfer to person(s) entitled	A, C, and F	
Person entitled to securities belonging to a decedent's estate when a legal representative has not been/ will not be appointed and the estate is not being settled in accordance with state statute	Redemption or sale	A, B, and F	A certified copy of the decedent's death certificate and properly completed PD F 5336 showing distribution
	Transfer to person(s) entitled	A, C, and F	
Entity Account Manager or new Entity Account Manager	Change/correct Entity Account Information	A, E-2, & F	Copy of trust, corporate resolution, letters of appointment, death certificate, etc., as applicable. See instructions.
	Change/correct Entity Account Manager Information	A, E-2, & F	
	Change/correct Entity Account Manager	A, E-2, E-3, & F	
Currently Acting Entity Account Manager	Change of Entity Account Manager	A, D-2, & F	Copy of trust, corporate resolution, letters of appointment, death certificate, etc., as applicable. See instructions.

## Part A

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

### Account and Transaction Information

#### 1. TreasuryDirect Account Information

TreasuryDirect Account Number: \_\_\_\_\_

TreasuryDirect Account Name: \_\_\_\_\_

Taxpayer Identification Number (SSN/EIN): \_\_\_\_\_

#### 2. Transactions Requested *(check all that apply)*

- |  |  |
|--|--|
| <input type="checkbox"/> Redemption of online E, EE, or I savings bonds.                     | <input type="checkbox"/> Sale of an online Treasury bill, note, bond, or TIPS.   |
| <input type="checkbox"/> Redeem C of I account.  | <input type="checkbox"/> Transfer of an online E, EE, or I savings bond to another online TreasuryDirect account. Complete Part C-1.           |
| <input type="checkbox"/> Edit the registration of existing online E, EE, or I savings bonds. | <input type="checkbox"/> Transfer of an online Treasury bill, note, bond, or TIPS to another online TreasuryDirect account. Complete Part C-1. |
| <input type="checkbox"/> Change/correct account owner's name.                                | <input type="checkbox"/> Transfer of an online Treasury bill, note, bond, or TIPS to a Legacy Treasury Direct account. Complete Part C-2.      |
| <input type="checkbox"/> Change/correct Entity Account information.                          | <input type="checkbox"/> Transfer of an online Treasury bill, note, bond, or TIPS to a financial institution. Complete Part C-3.               |
| <input type="checkbox"/> Correct account owner's Social Security Number.                     | <input type="checkbox"/> Remove hardlock.  |
| <input type="checkbox"/> Change/correct Entity Account Manager information.                  | <input type="checkbox"/> Other (specify) _____   |
| <input type="checkbox"/> Correct account owner's date of birth.                              | _____  |

#### 3. Capacity of Applicant(s) *(check all that apply)* *(Supporting evidence is often required; see the instructions.)*

- Individual Account Owner
- Entity Account Manager
- Surviving secondary owner or beneficiary
- Non-converting coowner or beneficiary
- Legal representative of the estate of \_\_\_\_\_
- Legal guardian of the estate of \_\_\_\_\_
- Person(s) entitled as shown on PD F 1455
- Parent of a minor account owner
- Attorney-in-fact
- Person(s) entitled through judicial proceedings
- Person(s) entitled to decedent's estate as shown on PD F 5336
- Other (specify) \_\_\_\_\_

## Part B

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

### Redeem Online E, EE, OR I Savings Bonds or Sell Online Treasury Bills, Notes, Bonds, OR TIPS

Complete a separate Part B for each separate redemption/sale request and/or if the number of securities to be redeemed/sold is more than can be described in the space provided.

**I request redemption of the online E, EE, or I savings bonds, or the sale of Treasury bills, notes, bonds, or TIPS indicated below:**

#### 1. Description of Securities

Redeem/sell **ALL** my securities in the requested TreasuryDirect account.

Confirmation Number	Portion to be Redeemed/Sold (if neither block is checked, redemption/sale in FULL will be assumed)
	<input type="checkbox"/> Redemption/sale of security or C of I in FULL OR <input type="checkbox"/> Redemption/sale of security or C of I to the extent of \$ _____
	<input type="checkbox"/> Redemption/sale of security or C of I in FULL OR <input type="checkbox"/> Redemption/sale of security or C of I to the extent of \$ _____
	<input type="checkbox"/> Redemption/sale of security or C of I in FULL OR <input type="checkbox"/> Redemption/sale of security or C of I to the extent of \$ _____
	<input type="checkbox"/> Redemption/sale of security or C of I in FULL OR <input type="checkbox"/> Redemption/sale of security or C of I to the extent of \$ _____

#### 2. Payee Information

\_\_\_\_\_ (Name)

\_\_\_\_\_ (Social Security Number)      OR      \_\_\_\_\_ (Employer Identification Number)

#### 3. Direct Deposit Instructions

I request that the proceeds from the redemption/sale be deposited to:

\_\_\_\_\_ (Name[s] on the Account)

\_\_\_\_\_ (Depositor's Account No.)

Type of Account:  Checking  Savings

Bank Routing No. \_\_\_\_\_

\_\_\_\_\_ (Financial Institution's Name)      \_\_\_\_\_ (Phone Number)

#### TRANSFER AND SALE AUTHORIZATION

I/We request the securities described above be transferred from my identified TreasuryDirect account to the Federal Reserve Bank of Chicago (FRB Chicago). I/We also authorize FRB Chicago, as fiscal agent of the United States, to sell the above-identified securities and to charge a transaction fee for each security which will be deducted prior to depositing the settlement amount due me/us. I/We understand FRB Chicago will make a reasonable effort to obtain a price quote from at least three (3) government securities dealers and will sell the securities to the dealer with the highest price quote for next day settlement. I/We agree to accept the price received by FRB Chicago from the dealer selected as having the highest price quote. I/We understand the Treasury Department and FRB Chicago will not be liable for changes in market conditions affecting the price received for the securities, or for any loss, which I/we may incur as a result of the transaction or the inability of FRB Chicago to complete the transaction.

## Part C-1

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

### Transfer Online E, EE, OR I Savings Bonds, or Online Treasury Bills, Notes, Bonds, or TIPS, to Another TreasuryDirect Account

Complete a separate Part C-1 for each separate transfer request and/or if the number of securities to be transferred is more than can be described in the space provided.

**I request/consent to transfer of the following-described online Treasury securities as indicated in Item 2.**

By submitting this form, I certify that I understand the securities described will be removed from my account and transferred to the recipient's TreasuryDirect account. I also understand the registration of the transferred securities will be changed to show the owner of the account receiving the securities as the single owner.

If this is a savings bond transaction, I certify that this transfer is either for the purpose of making a gift or is in response to a final judgment, court order, divorce decree, or property settlement agreement.

NOTE: If you are requesting transfer of savings bonds to a trust, carefully read and complete Page 6.

TAX LIABILITY: I certify that I understand this transaction may be reported to the Internal Revenue Service and that this transfer may result in a tax liability.

**1. Description of Securities**

Transfer **ALL** my securities in the requested TreasuryDirect account.

Confirmation Number	Portion to be Transferred (if neither block is checked, transfer in FULL will be assumed)
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____

**2. Transfer Instructions**

*Transfer security(ies) to:*

**TreasuryDirect Account Number:** \_\_\_\_\_

**TreasuryDirect Account Name:** \_\_\_\_\_

**Taxpayer Identification Number (SSN/EIN):** \_\_\_\_\_

## Part C-1 (continued)

### 3. TAX LIABILITY NOTICE (Carefully read before completing Item 4.)

Upon the transfer of savings bonds to a trust, you must include in your gross income any accumulated interest on the bonds, if you have not already reported it, unless, under the grantor trust provisions of the Internal Revenue Code, you are treated as the owner of the portion of the trust represented by any tax-deferred accumulated interest on the transferred bonds. If you are treated as the owner of that portion, the accumulated interest continues to be your income rather than that of the trust, and therefore, you may continue to defer reporting the interest earned each year. You must include the total accumulated interest in your gross income when the bonds are disposed of or finally mature, whichever is earlier. These rules apply when bonds being transferred are Series I bonds, Series EE bonds, or Series E bonds, if you are the owner of the portion of the trust represented by the tax-deferred accumulated interest.

Generally, you will be treated as the owner of a trust that you have created to the extent that you retain certain powers over or interests in the trust. For example, you will be treated as the owner of the portion of the trust represented by any tax-deferred accumulated interest on the transferred bonds under the following circumstances:

- (1) You will be treated as the owner of a trust to the extent that you have an unconditional power to revest in yourself title to the trust assets. Thus, if you can, at your discretion, revoke all or part of the trust so that the bonds will be returned to you, you will be treated as the owner of the portion of the trust represented by any accumulated interest on the bonds.
- (2) If the trust instrument provides that the transferred bonds or the proceeds from the redemption or disposition of those bonds must be distributed to you or your spouse, or held or accumulated for future distribution to you or your spouse, you will be treated as the owner of the portion of the trust represented by any accumulated interest on the bonds. You will be treated as the owner in this circumstance irrespective of the terms of the trust.
- (3) You will be treated as the owner of a trust to the extent that you retain a power to control the beneficial enjoyment of property transferred to a trust. Thus, if you retain, under the terms of the trust instrument, an immediately exercisable power to determine, in your sole discretion, who will receive the bonds or the proceeds from the redemption or disposition of the bonds, then you will be treated as the owner of the portion of the trust represented by any accumulated interest.

The examples outlined above are illustrative only and they are not intended to cover all possible situations in which you could be treated as the owner of a trust or a portion of a trust. Furthermore, events can occur, such as the renunciation of a retained power or interest, which would cause you to cease being treated as the owner of a trust. If you are not sure whether you will be treated as the owner of a trust, you may request a letter ruling from the Internal Revenue Service. A request for a letter ruling should be sent to: **Internal Revenue Service, ATTN: CC: DOM: CORP: T, PO Box 7604, Ben Franklin Station, Washington, DC 20044.**

If you have any questions concerning the information to be submitted in connection with a letter ruling request, you may call (202) 622-7560.

### 4. TAX LIABILITY STATEMENT (*This section must be completed.*)

You must check box a or b. (See "TAX LIABILITY NOTICE" above.)

*"Interest"* includes interest earned on EE/E or I bonds from the issue date until the date of transfer.

This statement will also apply to all future transactions requested by the same owner(s) or person(s) entitled to the same trust.

You must mark box a or b to indicate if you are the owner of the portion of the trust represented.

**For Federal income tax purposes:**

- a.  I certify that I will be treated as owner of the portion of the trust represented by the tax-deferred accumulated interest on the bonds being transferred. *If this box is marked, the interest will be tax-deferred (**interest will not be reported** to the Internal Revenue Service as a result of the transfer).*
- b.  I certify that I will not be treated as owner of the portion of the trust represented by the tax-deferred accumulated interest on the bonds being transferred. *If this box is marked, **interest will be reported** to the Internal Revenue Service for the taxable year in which the bonds were transferred to the trust. A 1099-INT will be generated for the Social Security Number specified.*

## Part C-2

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

### Transfer Online Treasury Bills, Notes, Bonds, or TIPS, to a Legacy Treasury Direct Account

Complete a separate Part C-2 for each separate transfer request and/or if the number of securities to be transferred is more than can be described in the space provided.

**I request/consent to transfer of the following-described online Treasury bills, notes, bonds, or TIPS, as indicated in Item 2.**

**1. Description of Securities**

Transfer **ALL** my securities in the requested TreasuryDirect account.

Confirmation Number	Portion to be Transferred (if neither block is checked, transfer in FULL will be assumed)
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____

**2. Transfer Instructions**

**TRANSFER TO A LEGACY TREASURY DIRECT ACCOUNT NUMBER**

Legacy Treasury Direct Account Number \_\_\_\_\_ (May be left blank if New Account Request [PD F 5182] is attached.)

Legacy Treasury Direct Account Name \_\_\_\_\_ (Identify the Legacy Treasury Direct account to which you want your securities transferred.)

Taxpayer Identification Number (if available)

1<sup>st</sup> Named Owner \_\_\_\_\_ OR \_\_\_\_\_  
Social Security Number Employer Identification Number

**Part C-3**

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

**Transfer Online Treasury Bills, Notes, Bonds, or TIPS, to a Financial Institution**

Complete a separate Part C-3 for each separate transfer request and/or if the number of securities to be transferred is more than can be described in the space provided.

**I request/consent to transfer of the following-described online Treasury bills, notes, bonds, or TIPS, as indicated in Item 2.**

**1. Description of Securities**

Transfer **ALL** my securities in the requested TreasuryDirect account.

Confirmation Number	Portion to be Transferred (if neither block is checked, transfer in FULL will be assumed)
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____
	<input type="checkbox"/> Transfer of security in FULL OR <input type="checkbox"/> Transfer of security to the extent of \$ _____

**2. Transfer Instructions**

**TRANSFER TO A FINANCIAL INSTITUTION (Before completing, see instructions.)**

Routing Number \_\_\_\_\_

Financial Institution Wire Name \_\_\_\_\_

Special Handling Instructions \_\_\_\_\_

\_\_\_\_\_





**Part D-2**

<b>TreasuryDirect Account Name:</b> _____
<b>TreasuryDirect Account Number:</b> _____

**Consent to Change the Entity Account Manager of a TreasuryDirect Account**

Complete Part D-2 to consent to a change of Entity Account Manager for a TreasuryDirect account.

I _____ hereby authorize (Name of the Entity Account Manager consenting to the change)
the Bureau of the Public Debt, Parkersburg, WV, to remove my personal information as the Entity Account Manager for _____ (TreasuryDirect Entity Account Name)
and change the Entity Account Manager to _____ (Name of new Entity Account Manager)

**Part E-1**

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

**Change or Correct Account Information  
For an Individual TreasuryDirect Account**

**1. Change an Individual Account Owner's Name**

I certify that the account owner's name has been legally changed by:

Marriage     Divorce     Adoption     Naturalization     Court order

Other (explain) \_\_\_\_\_

to \_\_\_\_\_

(Furnish the New Legal Name)

**2. Correct an Individual Account Owner's Name**

I certify that the account owner's name is incorrectly shown on the account.

The account owner's correct legal name is: \_\_\_\_\_

**3. Correct an Individual Account Owner's Social Security Number**

I certify that the account owner's Social Security Number is incorrectly shown on the account.

The account owner's correct Social Security Number is: \_\_\_\_\_

**4. Correct an Individual Account Owner's Date of Birth**

I certify that the date of birth shown for the account owner on the TreasuryDirect account is incorrect and that the

account owner's correct date of birth is: \_\_\_\_\_

(Month/Day/Year)

**Part E-2**

**TreasuryDirect Account Name:** \_\_\_\_\_  
**TreasuryDirect Account Number:** \_\_\_\_\_

**Change or Correct the Entity Account Information**

**1. Change Entity Account Name**

I certify that the Entity Account name has changed to: \_\_\_\_\_  
\_\_\_\_\_

Provide an explanation for the change: \_\_\_\_\_  
\_\_\_\_\_

**2. Correct Entity Account Name**

I certify that the Entity Account name is incorrectly shown on the account.

The correct account name is: \_\_\_\_\_

**3. Correct Entity Account Taxpayer Identification Number**

I certify that the Entity Account Taxpayer Identification Number (EIN/SSN) is incorrectly shown on the account.

The correct account Taxpayer Identification Number is: \_\_\_\_\_

**Part E-2 (continued)**

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

**Change or Correct the Current Entity Account Manager Information**

**1. Change Entity Account Manager's Name**

I certify that the Entity Account Manager's name has been legally changed by:

Marriage       Divorce       Naturalization       Court order

Other (explain): \_\_\_\_\_

to: \_\_\_\_\_  
(Furnish the New Legal Name)

**2. Correct Entity Account Manager's Name**

I certify that the Entity Account Manager's name is incorrectly shown on the account.

The correct Entity Account Manager's legal name is:

\_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last)

**3. Correct Entity Account Manager's Social Security Number**

I certify that the Entity Account Manager's Social Security Number is incorrectly shown on the account.

The correct Entity Account Manager's Social Security Number is: \_\_\_\_\_

**4. Correct Entity Account Manager's Date of Birth**

I certify that the Entity Account Manager's date of birth is incorrectly shown on the account.

The Entity Account Manager's correct date of birth is: \_\_\_\_\_ (Month/Day/Year)

**Part E-3**

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

**Change Entity Account Manager – New Manager Information**

**1. Account Manager Name:**

\_\_\_\_\_  
(First Name) (Middle Name or Initial) (Last Name) (Suffix)

**2. Taxpayer Identification Number:**

\_\_\_\_\_  
(Social Security Number of new Entity Account Manager)

**3. Date of Birth:**

\_\_\_\_\_  
(Month / Day / Year)

**4. Street Address:**

\_\_\_\_\_  
\_\_\_\_\_

**5. City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**6. Home Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**7. Driver's License/State ID Number:** \_\_\_\_\_

**Issuing State:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**8. E-mail Address:** \_\_\_\_\_

**9. Mailing Address (check one):**

- Use the Entity Address**
- Use the Account Manager Address**

In support of the Entity Account Manager change requested above, evidentiary documentation must also be provided to explain why the change is being requested. For example, the evidence necessary may include a certified copy of:

- the trust document, if a successor trustee will be the new account manager
- a letter of resignation, if the current administrator, legal representative, or trustee resigned
- the new partnership agreement, if a member left the partnership or is stepping down as the account manager
- the corporate resolution or articles of organization, if the company reorganized or officers have changed
- the letters of appointment, if a new guardian or legal representative has been appointed
- a death certificate, if the current Entity Account Manager is deceased

NOTE: The current Entity Account Manager must complete Parts A and D-2 and sign in Part F. If he or she is unable to sign, please provide evidence as to why—evidence such as a certified copy of a death certificate.

## Part F

TreasuryDirect Account Name: \_\_\_\_\_

TreasuryDirect Account Number: \_\_\_\_\_

### Signatures and Certifications

The undersigned certify under penalty of perjury that the information provided herein is true and correct to the best of our knowledge and belief and agree to distribution of the securities as indicated. We bind ourselves, our heirs, legatees, successors and assigns, jointly and severally, to hold the United States harmless on account of the transaction requested, to indemnify unconditionally and promptly repay the United States in the event of any loss which results from this request, including interest, administrative costs, and penalties. We consent to the release of any information regarding this transaction, including information contained in this application, to any party having an ownership or entitlement interest in the securities or checks.

- **You must wait until you are in the presence of a certifying officer to sign this form.**
- **Certifying officers are available at banks, trust companies, and credit unions.**
- **Certification by a notary public is NOT acceptable.**

Sign Here: \_\_\_\_\_ (Daytime Telephone No.)

\_\_\_\_\_  
(Number and Street or Rural Route, City, State, and ZIP Code)

Sign Here: \_\_\_\_\_ (Daytime Telephone No.)

\_\_\_\_\_  
(Number and Street or Rural Route, City, State, and ZIP Code)

Certifying Officer:

- **The Individual must sign in your presence and you must complete the certification and affix your stamp or seal.**
- **Acceptable certifications include the financial institution's official seal or stamp (such as corporate seal, signature guaranteed stamp, or medallion stamp).**
- **Certification by a notary public is NOT acceptable.**

I CERTIFY that \_\_\_\_\_, whose identity is known or was  
(Name of Person Who Appeared)

proven to me, personally appeared before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,  
(Month) (Year)

at \_\_\_\_\_, and signed this form.  
(City) (State)

\_\_\_\_\_  
(Signature of Certifying Officer)

\_\_\_\_\_  
(Printed Name and Title of Certifying Officer)

\_\_\_\_\_  
(Name of Financial Institution)

\_\_\_\_\_  
(Address)

**ACCEPTABLE CERTIFICATIONS:** Financial institution's official seal or stamp (such as corporate seal, signature guaranteed stamp, or medallion stamp).

\_\_\_\_\_  
(City, State, and ZIP Code)

**(Notary certification is NOT acceptable.)**

\_\_\_\_\_  
(Phone Number)

**(OFFICIAL STAMP  
OR SEAL)**

I CERTIFY that \_\_\_\_\_, whose identity is known or was  
(Name of Person Who Appeared)  
proven to me, personally appeared before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,  
(Month) (Year)

at \_\_\_\_\_, and signed this form.  
(City) (State)

**(OFFICIAL STAMP  
OR SEAL)**

**ACCEPTABLE CERTIFICATIONS:** Financial institution's official seal or stamp (such as corporate seal, signature guaranteed stamp, or medallion stamp).

**(Notary certification is NOT acceptable.)**

\_\_\_\_\_  
(Signature of Certifying Officer)

\_\_\_\_\_  
(Printed Name and Title of Certifying Officer)

\_\_\_\_\_  
(Name of Financial Institution)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, and ZIP Code)

\_\_\_\_\_  
(Phone Number)



**INSTRUCTIONS**

**Complete only the parts of the form that apply to the transaction(s) requested.**

**Use of Form** – Use this form to request transactions involving online E, EE, and I savings bonds, Treasury bills, notes, bonds, or TIPS, and/or a TreasuryDirect account which cannot be completed online. **Complete a separate PD F 5446 for each TreasuryDirect account number.**

**If a decedent's estate is involved, this form may ONLY be used in the following cases:**

- A legal representative has been appointed and is still acting and the legal representative wishes to redeem securities. The legal representative must use a PD F 1455 to distribute the securities to the persons entitled. The persons entitled may then use this form to request transfer or payment of securities.
- A legal representative has not been appointed to settle the decedent's estate but the person entitled to the securities wishes to request transfer or payment of securities. (Use a PD F 5336 to distribute the securities to the person(s) entitled if the redemption value of all securities owned by the decedent does not exceed \$100,000. Estates with securities valued over \$100,000 must be formally administered through the court and an administrator, executor, or similar representative appointed.)

**If a decedent's estate is involved, this form may NOT be used in the following cases:**

- The decedent's estate was formally administered through the court and has been closed (use PD F 5394).
- The decedent's estate is being settled in accordance with State statute such as Summary Administration, Small Estates Acts, Texas Muniment of Title, Louisiana Judgment of Possession, etc., without the necessity of the court appointing an administrator, executor, or similar legal representative (use PD F 5394).

<b>Part A</b>	<b>Account and Transaction Information (Complete this part for ALL transactions)</b>	
<p><b>1. TreasuryDirect Account Information</b> – Provide the TreasuryDirect account number, account name, and Taxpayer Identification Number (Social Security Number or Employer Identification Number).</p> <p><b>2. Transactions Requested</b> – Mark the appropriate box to show the type of transaction requested. You can mark more than one box, if multiple transactions are requested.</p> <p><b>3. Capacity of Applicant(s)</b> – Mark the box that best describes the capacity in which you are acting. You can check more than one box, if applicable. <b>Provide any necessary evidence, as described below:</b></p>		
	<b><i>If you check this box.....</i></b>	<b><i>then you must also provide this evidence.....</i></b>
	Individual Account Owner or parent of a minor account owner, and the security is a restricted, converted security	If the non-converting coowner or beneficiary is deceased, a certified copy of his/her death certificate.
	Entity Account Manager	A copy of the evidence that establishes your authority to request the transaction. If filed with a court, the evidence must be under court seal. For example: copy of trust, corporate resolution, letters of appointment, death certificate, etc., as applicable. See instructions.
	Surviving secondary owner or beneficiary including non-converting coowner or beneficiary	A certified copy of the decedent's death certificate.
	Legal representative	A certified copy of your letters of appointment, dated within one year of submission.
	Legal guardian	A certified copy of your letters of appointment, dated within one year of submission.
	Person(s) entitled as shown on PD F 1455	A certified copy of the legal representative's or legal guardian's letters of appointment dated within one year of submission, certified copies of death certificates for all deceased registrants, and a PD F 1455 showing distribution.
	Attorney-in-fact	A copy of the power of attorney document, containing the grantor's signature and witnessed or certified in accordance with applicable State law.
	Person(s) entitled through judicial proceedings <i>(The persons shown to be entitled are making this request in connection with a legal proceeding or court order involving the owner/primary owner of the online E, EE, or I savings bonds, Treasury bills, notes, bonds, or TIPS, such as divorce decree, court approved property settlement agreement, levy, money judgment, bankruptcy proceeding, etc.)</i>	A certified copy of the court approved document authorizing the transaction.

Person(s) entitled to decedent's estate as shown on PD F 5336	A certified copy of the decedent's death certificate and properly completed PD F 5336 showing distribution.
Other	A copy of the evidence that establishes your authority to request the transaction. If filed with a court, the evidence must be under court seal.

**Part B Redeem Online E, EE, or I Savings Bonds or Sale of Online Treasury Bills, Notes, Bonds, or TIPS**

**1. Description of Securities** – Check the box to redeem or sell all securities or list the confirmation number for each security or C of I account that you are requesting redemption/sale of in whole or in part. For each security or C of I account listed, indicate whether you are requesting redemption/sale in full or in part by checking the appropriate box in the column next to the security confirmation number. If you don't check either box, we will assume redemption/sale in full is desired.

If partial redemption of E, EE, or I savings bonds or C of I account is requested, check the appropriate box and specify the amount you are requesting be redeemed. You can request partial redemption of a bond as long as the amount that you are requesting be redeemed is at least \$25.00 or more and the redemption value of the remaining portion of the bond is not less than \$25.00. For example, you can request partial redemption of a bond that has a value of \$67.12 to the extent of any amount from \$25.00 to \$42.12. A bond must have a current redemption value of at least \$50.00 or more before you can request partial payment. All redemptions will be comprised of principal and a proportionate amount of interest.

Check the appropriate box to transfer and sell a portion of the Treasury bills, notes, bonds, or TIPS in your account.

If partial transfer of Treasury bills, notes, bonds, or TIPS is requested, check the appropriate box and specify the amount you are requesting be transferred. Enter only the amount being transferred (in \$100 increments) and list the confirmation number. **NOTE: The amount to be transferred and sold and the amount remaining in the CUSIP must satisfy both the minimum and multiple holding requirements for the security.**

If you list a confirmation number for a matured CUSIP that has been reinvested, or is within 10 days of reinvestment, FRB Chicago will transfer and sell the current or the new CUSIP number and indicate the dollar amount.

**Important Notices**

- The Treasury Department and FRB Chicago will not be liable for changes in market conditions affecting the price received for the security, or for any loss, which you may incur as a result of the transaction or the inability of FRB Chicago to complete the transaction.
- Only original signatures will be accepted (stamped signatures are not acceptable).
- If you are a corporation with a governing body, a resolution or a PD F 1010 must accompany this form.
- If any person signing this form is acting in a fiduciary capacity, failure to provide legal evidence may delay processing.

This form will not be accepted with alterations or corrections.

**Transfer and Sale Authorization**

Please carefully read this section before signing the form, as it describes the nature of the transaction authorized.

You are transferring the identified securities to FRB Chicago for the sole purpose of having the securities sold. You are authorizing the identified securities, once transferred, to be sold by FRB Chicago. A transaction fee will be charged (see **FEES** for further information). Because FRB Chicago enters into an agreement to sell the securities on the same day that it receives the securities, the authorization for the sale and transfer of the securities becomes irrevocable when the transfer from your TreasuryDirect account to the account of FRB Chicago is made. FRB Chicago will make a reasonable effort to obtain a price quote from at least (3) government securities dealers and will sell the securities to the dealer with the highest quote for next day settlement. You agree to accept the price received by FRB Chicago from the dealer selected as having the highest price quote. On the next full business day after the trade date, the settlement amount will be released electronically by FRB Chicago to the account at the financial institution currently designated to receive your TreasuryDirect payments. The Treasury Department and FRB Chicago will not be liable for changes in market conditions affecting the price received for the securities or for any loss, which you may incur as a result of the transaction or the inability of FRB Chicago to complete the transaction.

In the event FRB Chicago is unable to obtain at least one quote for the securities, the securities will be returned to your TreasuryDirect account on the next full business day following the receipt of the securities by FRB Chicago, and FRB Chicago will notify you. No transaction fee will be charged.

**Fees** – A transaction fee for the service will be charged for **each** security sold on your behalf. (A security is considered as any amount within a TreasuryDirect account, which is identified by a separate confirmation number.) FRB Chicago

will deduct the fee prior to depositing the settlement amount (also referred to as "net amount") to the account at the financial institution currently designated to receive your TreasuryDirect payments. The amount of the fee is published by notice in the Federal Register.

**Settlement Amount** – The settlement amount (also referred to as "net amount") minus the transaction fee will be credited by direct deposit (electronic funds transfer) to the account at the financial institution currently designated to receive your TreasuryDirect payments.

**2. Payee Information** – Furnish the name and taxpayer identification number of the payee. Furnish the Social Security Number if the payee is an Individual. If payment is being requested to an estate and the IRS has assigned an Employer Identification Number, provide that number.

**3. Direct Deposit Instructions** – Furnish information on the bank account where the payment is to be direct deposited. All payments must be made by direct deposit to a designated bank account.

All persons requesting redemption must sign in Part F of the form. If payment is to be deposited to a bank account in the name of a different person, then that person or his/her representative, who can authorize such a deposit, must also sign in Part F.

**Parts C-1, C-2,  
and C-3**

**Transfer Online E, EE, or I SAVINGS BONDS or Online Treasury Bills, Notes, Bonds, or TIPS**

**Part C-1 – Transfer Online E, EE, or I Savings Bonds, or Online Treasury Bills, Notes, Bonds, or TIPS, to Another TreasuryDirect Account**

**1. Description of Securities** – Check the box to transfer all securities or list the confirmation number for each security that you are requesting transfer of in whole or in part. For each security listed, indicate whether you are requesting transfer in full or in part by checking the appropriate box in the column next to the security confirmation number; if you don't check either box, we will assume transfer in full.

If partial transfer of E, EE, or I savings bonds is requested, check the appropriate box and specify the amount you are requesting be transferred. You can request partial transfer of a bond as long as the amount that you are requesting be transferred is at least \$25.00 or more and the redemption value of the remaining portion of the bond is not less than \$25.00. For example, you can request partial transfer of a bond that has a value of \$67.12 to the extent of any amount from \$25.00 to \$42.12. A bond must have a current redemption value of at least \$50.00 or more before you can request partial transfer. Transfer will be comprised of principal and a proportionate amount of interest.

If partial transfer of Treasury bills, notes, bonds, or TIPS is requested, check the appropriate box and specify the amount you are requesting be transferred. Enter only the amount being transferred (in \$100 increments) and list the confirmation number. **NOTE: The amount to be transferred and the amount remaining in the CUSIP must satisfy both the minimum and multiple holding requirements for the security.**

**2. Transfer Instructions:**

- **TreasuryDirect Account Number** – Enter the number of the account to which the securities are being transferred. If you are the legal representative of a decedent's estate transferring securities to the person entitled, and he/she does not have a TreasuryDirect account and does not wish to open one, show "none" in the space for the account number.
- **TreasuryDirect Account Name** – Enter the account name or the name of the person entitled.
- **Taxpayer Identification Number** – Enter the Taxpayer Identification Number (Social Security Number or Employer Identification Number) of the Individual or Entity entitled.

**3. Tax Liability Notice – Carefully read this section before completing Item 4.**

**4. Tax Liability Statement** – After reading the Tax Liability Notice in Item 3, you must mark box a or b in Item 4. Mark box a if you will be treated as the owner of the portion of the trust represented by the tax-deferred accumulated interest on the bonds being transferred. Mark box b if you will NOT be treated as owner of the portion of the trust represented by the tax-deferred accumulated interest on the bonds being transferred. "Interest" includes tax-deferred interest earned on EE/E or I bonds from the issue date until the date of transfer.

**Part C-2 – Transfer Online Treasury Bills, Notes, Bonds, or TIPS to a Legacy Treasury Direct Account**

- **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.

**Part C-3 – Transfer Online Treasury Bills, Notes, Bonds, or TIPS to a Financial Institution**

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 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).
- **Special Handling Instructions** – The customer name and account number at the financial institution for delivery of securities and any other instructions required by your financial institution, such as the name and telephone number of the person to be contacted at the financial institution for questions about the securities.

<p><b>Examples: To a financial institution for safekeeping:</b></p> <p>Routing Number: XXXXXXXXX</p> <p>Financial Institution Wire Name: ABC BK/TRUST</p> <p>Special Handling Instructions: FURTHER CREDIT TO JOHN DOE TRUST ACCOUNT NUMBER XXXXXX</p>	<p><b>To a financial institution for transfer to a brokerage firm:</b></p> <p>Routing Number: XXXXXXXXX</p> <p>Financial Institution Wire Name: ABC/CUST/BRKG</p> <p>Special Handling Instructions: FURTHER CREDIT TO JOHN DOE BROKERAGE ACCOUNT NUMBER XXXXXX</p>
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**Note:** All scheduled reinvestments will be cancelled at the time of transfer.

<b>Parts D-1 and D-2</b>	<b>Edit the Registration of Existing Online E, EE, or I Savings Bonds, or Treasury Bills, Notes, Bonds, or TIPS, or Consent to Change the Entity Account Manager of a TreasuryDirect Account</b>
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**Part D-1 – Edit the Registration of Existing Online E, EE, or I Savings Bonds, or Treasury Bills, Notes, Bonds, or TIPS**

- 1. Description of Securities** – Check the box to edit the registration of all securities or describe the securities on which you want to edit the registration.
- 2. New Registration Requested** – Provide the complete name and Social Security Number of the owner/primary owner. The account owner must be named as the owner/primary owner in the registration of online securities held in his/her current holdings. If a secondary owner or beneficiary is to be shown in the registration, check the appropriate box and provide the name and Social Security Number of the person to be shown as the secondary owner or beneficiary.

**Part D-2 – Consent to Change the Entity Account Manager of a TreasuryDirect Account**

- **Name of the Entity Account Manager consenting to the change** – Enter the name of the currently acting Entity Account Manager.
- **TreasuryDirect Entity Account Name** – Enter the name of the Entity (i.e., trust, partnership, corporation, deceased estate) as it appears on the TreasuryDirect account.
- **Name of the new Entity Account Manager** – Enter the name of the individual who will be acting as the new Entity Account Manager.
- Sign the form in Part F in ink, in the presence of an authorized certifying officer.

The new Entity Account Manager will need to provide his or her personal information on Part E-3 of PD F 5446 and join in signing the form in Part F in the presence of an authorized certifying officer.

<b>Parts E-1, E-2, and E-3</b>	<b>Change or Correct Account Information or Entity Account Manager Information</b>
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**Part E-1 – Change or Correct an Individual Account Information –**

**The following information must be provided by the Individual Account Owner**

- 1. Change an Individual Account Owner’s Name** – Complete this item if the account owner’s name has changed by marriage, divorce, adoption, naturalization, court order, or some other valid reason. Indicate the manner by which the name changed and furnish the account owner’s new legal name. Evidence may be required.

- 2. Correct an Individual Account Owner's Name** – Complete this item if an error was made in the account owner's name when the TreasuryDirect account was established. Furnish the account owner's correct legal name.
- 3. Correct an Individual Account Owner's Social Security Number** – Complete this item if an error was made in the account owner's Social Security Number when the TreasuryDirect account was established. Furnish the account owner's correct Social Security Number.
- 4. Correct an Individual Account Owner's Date of Birth** – Complete this item if an error was made in the account owner's date of birth when the TreasuryDirect account was established. Furnish the account owner's correct date of birth.

**Part E-2 –  
Change or Correct Entity Account Information**

**The following information must be provided by the Entity Account Manager**

- 1. Change Entity Account Name** – Complete this item if the name of the Entity has changed. Provide an explanation for the name change.
- 2. Correct Entity Account Name** – Complete this item if the Entity Account name has been entered incorrectly.
- 3. Correct Taxpayer Identification Number** – Complete this item if the taxpayer identification number for the Entity was entered incorrectly.

**Change or Correct Current Entity Account Manager Information**

**The following information must be provided by the Entity Account Manager**

- 1. Change Entity Account Manager's Name** – Complete this item if the Entity Account Manager's name has changed by marriage, divorce, adoption, naturalization, court order, or some other valid reason. Indicate the manner by which the name changed and furnish the Entity Account Manager's new legal name. Evidence may be required.
- 2. Correct Entity Account Manager's Name** – Complete this item if an error was made in the Entity Account Manager's name when the TreasuryDirect account was established. Furnish the Entity Account Manager's correct legal name.
- 3. Correct Entity Account Manager's Social Security Number** - Complete this item if an error was made in the Entity Account Manager's Social Security Number when the TreasuryDirect account was established. Furnish the Entity Account Manager's correct Social Security Number.
- 4. Correct Entity Account Manager's Date of Birth** - Complete this item if an error was made in the Entity Account Manager's date of birth when the TreasuryDirect account was established. Furnish the Entity Account Manager's correct date of birth.

**Part E-3 – Change Entity Account Manager – New Manager Information**

**The following information must be provided by the new Entity Account Manager**

- 1. Account Manager Name** – Enter the new Entity Account Manager's full name including suffix, if appropriate.
- 2. Taxpayer Identification Number** – Enter the new Entity Account Manager's Social Security Number.
- 3. Date of Birth** – Enter the new Entity Account Manager's date of birth.
- 4. Street Address** – Enter the new Entity Account Manager's home street address.
- 5. City/State/Zip Code** – Enter the new Entity Account Manager's home address city, state and zip code.
- 6. Home Phone** – Enter the home, work and cell telephone number for the new Entity Account Manager.
- 7. Driver's License/State ID Number** – Enter the driver's license or state ID number, including the issuing state and expiration date, for the new Entity Account Manager.
- 8. E-mail Address** – Enter the e-mail address the new Entity Account Manager wishes to use to communicate with TreasuryDirect. This e-mail address will be used for important messages from the TreasuryDirect system and for communication from within the TreasuryDirect account.
- 9. Mailing Address** – Indicate the mailing address TreasuryDirect Customer Service should use if it is necessary to mail correspondence to the new Entity Account Manager by postal mail.

**The new Entity Account Manager must sign the form in Part F in the presence of an authorized certifying officer.**

<b>Part F</b>	<b>Signatures and Certifications (Complete this part for ALL transactions)</b>	
<p><b>Signatures/Certifications</b> – Each applicant must appear before and establish identification to the satisfaction of an authorized certifying officer and sign the application in the officer's presence. The officer must then complete the certification form provided and imprint the seal or stamp required in certifying requests. For certifications within the United States, the certifying individual must be authorized to bind his/her institution by his/her acts and guarantee signatures to assignments of securities or certify assignments of securities. For a list of authorized certifying individuals and the required evidence of authority, see Title 31 CFR Part 363.</p> <p>If you are a parent of a minor account owner, your signature certifies that you are requesting the transaction on the minor's behalf, for the minor's benefit.</p>		
	<p><b>Sample</b> certification for a financial Institution:</p> <p>SIGNATURE GUARANTEED  ABC National Bank  Hillview Branch</p>	<p>Acceptable certification for a brokerage:</p> <p>SIGNATURE GUARANTEED  MEDALLION GUARANTEED  Generic Brokerage</p>
	<p>_____</p> <p>Authorized Signature</p>	<p>_____</p> <p>Authorized Signature  XXXXXXXXX  SECURITIES TRANSFER AGENTS MEDALLION PROGRAM  [Bar Code]</p>

**Additional Evidence** – The Commissioner of the Public Debt, as designee of the Secretary of the Treasury, reserves the right, in any particular case, to require the submission of additional evidence.

**Assembly of Form** – Complete and submit only the parts of the form that apply to the transaction(s) requested. Parts A and F must be completed and submitted for all transactions. Multiple copies of any part may be completed and submitted together, if necessary. Attach all completed parts together, in alphabetical order.

**Where to Send** – Send all completed parts of the form, as well as any other forms and evidence, to:

DEPARTMENT OF THE TREASURY  
BUREAU OF THE PUBLIC DEBT  
PO BOX 7015  
PARKERSBURG, WV 26106-7015

**PRIVACY ACT AND PAPERWORK REDUCTION ACT NOTICE**

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 30 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 the completed form to the above address; send to the address shown in "Where to Send" in the instructions.**