FS Form 5179 (Revised August 2019)

OMB No. 1530-0042

Legacy Treasury Direct[®] Security Transfer Request

BUREAU OF THE Fiscal Service

IMPORTANT: Follow instructions in filling out this form. Making any false, fictitious, or fraudulent claim or statement to the United States is a crime and may be prosecuted. Print in ink or type all information. This form will not be accepted if it has any alterations or corrections.

1. LEGACY TREASURY DIRECT ACCOUNT INFORMATION

Legacy Treasury Direct ACCOUNT NUMBER: _____

ACCOUNT NAME: _____

I Transfer ALL m	ecurities for the a	bove Legacy Treasury			
	urities totaling \$	from the	CUSIPs below. (Ad	ditional forms are required	for more than 9 CUSIPs)
CUSIP	AMOUNT	CUSIP	AMOUNT	CUSIP	AMOUNT
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
Transfer \$	of my hol	dings for CUSIP num	oer		
	U	oldings for this CUSIP s shown on your Lega		•	
SUB-ACCOUNT	AMOUNT	SUB-ACCOUNT	AMOUNT	SUB-ACCOUNT	AMOUNT
	\$		\$		\$
3. TRANSFER INST	RUCTIONS – Chec	k only one transfer o	option box and pr	ovide the requested	information
to receive the transfe	erred securities. It m	ust be an existing acc	ount; new account	the spaces below, th s are not available.	e account you want
to receive the transfe Legacy Treasury Dire Legacy Treasury Dire	erred securities. It m ect account number ect account name _	ust be an existing acc	count; new account	s are not available.	·
to receive the transfe Legacy Treasury Dire Legacy Treasury Dire	erred securities. It m ect account number ect account name _	ust be an existing acc	ble):	s are not available.	·
to receive the transfe Legacy Treasury Dire Legacy Treasury Dire	erred securities. It m ect account number ect account name _	amed owner (if availa	count; new account	s are not available.	
to receive the transfe Legacy Treasury Dire Legacy Treasury Dire Taxpayer Identificatio	erred securities. It m ect account number ect account name _ on Number of first-n Social Security Num established online	amed owner (if availa	ble):	s are not available.	umber
to receive the transfe Legacy Treasury Dire Legacy Treasury Dire Taxpayer Identificatio Taxpayer Identificatio	erred securities. It m ect account number ect account name _ on Number of first-n Social Security Num established online ed securities.	amed owner (if availa	ble): OR OR	s are not available. Employer Identification Nu	umber account you want to
to receive the transfe Legacy Treasury Dire Legacy Treasury Dire Taxpayer Identificatio Transfer to an e receive the transferre	erred securities. It m ect account number ect account name on Number of first-n Social Security Num established online ed securities.	amed owner (if availands	ble): OR OR	s are not available. Employer Identification Nu	umber account you want to
to receive the transfe Legacy Treasury Dire Legacy Treasury Dire Taxpayer Identificatio Transfer to an e receive the transferre TreasuryDirect accou	erred securities. It m ect account number ect account name on Number of first-n Social Security Num established online ed securities. unt number unt name	amed owner (if availands	ble): OR ount – Identify, in th	s are not available. Employer Identification Nu	umber account you want to
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External Transfer to a Financial Institution or Brokerage Firm

Failure to provide any of the following information could delay the transfer. See Instructions before completing.

Routing Number:	
Financial Institution Wire Name:	
Agent or Broker Name and Phone Number:	_
Agent or Broker Address:	_
Special Handling Instructions:	

Mark this box if the transfer is between spouses or incident to a divorce.

4. SIGNATURES AND CERTIFICATION

Under penalties of perjury, I/we certify that the information provided on this form is true, correct, and complete.

	•	If there are two own		the word "and," both mu	ıst sign.	
Sign Here:						
	(Print Name)				(Social Security Num	iber)
Home Address	(Number ar	d Street or Rural Route			(Daytime Telephone N	lumber)
	(City)	(State)	(ZIP Code)		(E-mail Address)	
Sign Here:						
	(Print Name)				(Social Security Num	iber)
Home Address		d Street or Rural Route			(Daytime Telephone N	lumber)
	(City)	(State)	(ZIP Code)		(E-mail Address)	
				appeared and date of ap Person(s) must sign in yo		e completed.
I CERTIFY that			of Persons Who		, whose	identity(ies)
is/are known or p	proven to me, pe			day of		
at	(City, S			and signed this form.	(Month)	(Year)
(5	Signature and Title	of Certifying Officer)			(OFFICIAL STAMP OR SEAL)	
	(Name of Financ	ial Institution)			ABLE CERTIFICATIONS Institution's Official Seal	
	(Addre	ess)		(such as Stamp, o	Corporate Seal, Signatur Medallion Stamp). Brol Indallion Stamp.	e Guaranteed
	(City, State	e, ZIP code)			certification is NOT ac	ceptable.)

I CERTIFY that		, whose id	entity(ies)
(Names of Persons WI	no Appeared)		
is/are known or proven to me, personally appeared before me this	s day c	of	
		(Month)	(Year)
at	_ and signed this form.		
(City, State)			
(Signature and Title of Certifying Officer)	(OFFICIAL STAMP OR SEAL)		
(Name of Financial Institution)		,	
(Address)	ACCEPTABLE CERTIFICATIONS: Financial Institution's Official Seal or Stamp (such as Corporate Seal, Signature Guaranteed Stamp, or Medallion Stamp). Brokers must use a Medallion Stamp.		aranteed
(City, State, ZIP code)			
(Telephone)	(Notary o	certification is NOT accepta	ble.)

INSTRUCTIONS

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 and enter the o total dollar amount of the securities being transferred,
 - CUSIP number (for example, 912795XXX) which identifies the securities being transferred (located under the heading "Security" on your *Statement of Account*),
 - o amount or total par of the CUSIP being transferred.
- To transfer a portion of one security in your Legacy Treasury Direct account, check the third box and enter the
 - o dollar amount of only the security being transferred,
 - CUSIP number of the security being transferred.
 - 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 only one transfer option

Internal transfer to another Legacy Treasury Direct account - Check the box to transfer your securities to another Legacy Treasury Direct account number. The transfer must be to an existing account; new accounts aren't available. Enter the

- account number of the account receiving the transferred securities,
- name on the account receiving the transferred securities (as shown on the transferee's Statement of Account),

• Taxpayer Identification Number (if available) on the account receiving the transferred securities.

Transfer to an on-line TreasuryDirect account - Check the box to transfer your securities to an online TreasuryDirect account number and provide the

- account number of the account receiving the transferred securities,
- name on the account receiving the transferred securities,
- Taxpayer Identification Number (if available) on the account receiving the transferred securities.

External Transfer to a Financial Institution or Brokerage Firm - 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 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).
- Agent or Broker Name and Phone Number.
- **Special Handling Instructions** The customer name and account number at the financial institution for delivery of securities and any other instructions required by the financial institution, such as the name and telephone number of the person to be contacted at the financial institution for questions about the securities.

Examples: To a financial institution for safekeeping:	To a financial institution for transfer to a brokerage firm:
Routing Number: XXXXXXXXX	Routing Number: XXXXXXXXX
Financial Institution Wire Name: ABC BK/TRUST	Financial Institution Wire Name: ABC BK/TRUST
Special Handling Instructions: FURTHER CREDIT TO	Special Handling Instructions: FURTHER CREDIT TO
JOHN DOE TRUST ACCOUNT NUMBER XXXXX	JOHN DOE BROKERAGE ACCOUNT NUMBER XXXXX

If the box by **Mark this Box** is not checked we will assume the transfer is neither between spouses nor incident to a divorce. **4. SIGNATURES AND CERTIFICATION**

Sign the request in the presence of an authorized certifying officer. 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). In case there are questions about this transfer, please provide a mailing address, daytime telephone number, and, if applicable, e-mail address. Certification of your signature is required. Acceptable certifying officers 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.

Acceptable seals and stamps:

- The financial institution's official seal or stamp, including: Signature Guaranteed seal or stamp; Endorsement Guaranteed seal or stamp; Corporate seal or stamp (a corporate resolution isn't required); or Issuing or paying agent seal or stamp (including name, location, and four-digit identification number or nine-digit routing number).
- The seal or stamp of Treasury-recognized Signature Guarantee Programs or other Treasury-approved Medallion Programs.

Sample certification for a financial institution: SIGNATURE GUARANTEED ABC National Bank Hillview Branch	Acceptable certification for a brokerage: SIGNATURE GUARANTEED MEDALLION GUARANTEED Generic Brokerage
Authorized Signature	Authorized Signature XXXXXXXX
	SECURITIES TRANSFER AGENTS MEDALLION PROGRAM [Bar Code]

WHERE TO SEND - Legal evidence or documentation you submit cannot be returned.

If requesting a transfer to another **Legacy Treasury Direct** account or to a **financial institution**, mail this form to Treasury Retail Securities Site, PO Box 9150, Minneapolis, MN 55480-9150.

If requesting a transfer to an online **TreasuryDirect** account, mail this form to Treasury Retail Securities Site, PO Box 7015, Minneapolis, MN 55480-7015.

To ensure timely processing, this form must be received at least ten business days in advance of

- the **maturity date** of the security
- an interest payment date for the security

Call us toll-free in the United States at 844-284-2676. Outside the U.S.? Call us at +1-304-480-6464

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 Fiscal Service 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, the Fiscal Service 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 Fiscal Service, 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.