RESET

PD F 5179 E
Department of the Treasury
Bureau of the Public Debt
(Revised October 2010)
www.treasurydirect.gov
1-800-722-2678

Legacy Treasury Direct ®

OMB No. 1535-0069

SECURITY TRANSFER REQUEST

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

1. Legacy Treasury Direct ACCOUNT INFORMATION

Legacy Treasury Direct ACCOUNT NUMBER ______________________

ACCOUNT NAME

____

____

____

FOR DEPARTMENT USE
DOCUMENT AUTHORITY
APPROVED BY
DATE APPROVED

2. SECURITIES IDENTIFICATION AND AMOUNT

CHECK THE BOXES WHICH APPLY AND PROVIDE THE INFORMATION 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**
	$			$	
	$			$	
	$			$	
	$			$	
	$			$	

☐ Transfer $ __________ of my holdings for CUSIP number __________

(If you are NOT transferring all of your holdings for this CUSIP, you must also list the specific sub-accounts and amounts to be transferred below. This information is shown on your Legacy Treasury Direct *Statement of Account*.)

SUB-ACCOUNT	AMOUNT	SUB-ACCOUNT	AMOUNT	SUB-ACCOUNT	AMOUNT
	$		$		$

3. TRANSFER INSTRUCTIONS

CHECK ONE BOX ONLY AND PROVIDE THE INFORMATION REQUESTED FOR THA TRANSFER.

☐ **INTERNAL TRANSFER TO ANOTHER Legacy Treasury Direct ACCOUNT NUMBER**

Legacy Treasury Direct ACCOUNT NUMBER ______________________ (May be left blank if *New Account Request* {PD F 5182} is attached.)

ACCOUNT NAME

____

____

____

Identify the Legacy Treasury Direct account to which you want your securities transferred.

TAXPAYER IDENTIFICATION NUMBER (IF AVAILABLE)

First-Named Owner ______________________ OR ______________________
Social Security Number / Employer Identification Number

☐ **TRANSFER TO AN ESTABLISHED ONLINE TreasuryDirect ACCOUNT NUMBER**

TreasuryDirect ACCOUNT NUMBER ______________________ (May be established at www.treasurydirect.gov.)

ACCOUNT NAME

____

____

____

Identify the TreasuryDirect account to which you want your securities transferred.

TAXPAYER IDENTIFICATION NUMBER (IF AVAILABLE)

First-Named Owner ______________________ OR ______________________
Social Security Number / Employer Identification Number

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

ROUTING NUMBER: ____________________

FINANCIAL INSTITUTION WIRE NAME: ____________________

AGENT/BROKER NAME: ____________________

AGENT/BROKER PHONE NUMBER: ____________________

SPECIAL HANDLING INSTRUCTIONS: ____________________

____

SEE INSTRUCTIONS FOR PRIVACY ACT AND PAPERWORK REDUCTION ACT NOTICE

4. AUTHORIZATION

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 Series Nos. 2-86 (31 CFR Part 357) and 1-93 (31 CFR Part 356). I/We understand all scheduled reinvestments will be cancelled at the time of transfer.

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

____
Signature **Title** (if appropriate)

____
Signature **Title** (if appropriate)

____________________ ____________________
Address **Telephone (Daytime)**

5. CERTIFICATION

YOUR SIGNATURE **MUST** BE CERTIFIED BY AN AUTHORIZED CERTIFYING INDIVIDUAL.

Instructions to Certifying Individual:

1. Name of person(s) who appeared and date/place of appearance **MUST** be completed.
2. Medallion stamps require an original signature.
3. Person(s) must sign in your presence.

I certify that ____________________, whose identity(ies) is/are known or proven to me,
Name(s) of Person(s) Who Appeared

personally appeared before me this ________ day of ____________ at ____________
Month/Year **City/State**

and signed this request.

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.**

____
Signature and Title of Certifying Individual

____
Name of Financial Institution

____
Address

____
City/State/ZIP Code

____
Telephone

Certification by a Notary is NOT Acceptable.

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Legacy Treasury Direct ®

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. 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

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:**

Routing Number: XXXXXXXXX
Financial Institution Wire Name: ABC BK/TRUST
Special Handling Instructions: FURTHER CREDIT TO JOHN DOE TRUST ACCOUNT NUMBER XXXXXX

To a financial institution for transfer to a brokerage firm:

Routing Number: XXXXXXXXX
Financial Institution Wire Name: ABC/CUST/BRKG
Special Handling Instructions: FURTHER CREDIT TO JOHN DOE 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:

SIGNATURE GUARANTEED
ABC National Bank
Hillview Branch

Authorized Signature

Acceptable certification for a brokerage:

SIGNATURE GUARANTEED
MEDALLION GUARANTEED
Generic Brokerage

Authorized Signature
XXXXXXXX
SECURITIES TRANSFER AGENTS MEDALLION PROGRAM
[Bar Code]

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