



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

TREASURY MARKETABLE SECURITIES TENDER

For Noncompetitive Purchases in Legacy Treasury Direct

TYPE OR PRINT IN INK ONLY – TENDERS WILL NOT BE ACCEPTED WITH ALTERATIONS OR CORRECTIONS

1. NONCOMPETITIVE BID INFORMATION Par Amount: _____ (Must Be Completed) \$ _____ (Sold in units of \$100)	2. Legacy Treasury Direct ACCOUNT NUMBER (If NOT furnished, a new account will be opened.) _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">DEPARTMENT USE</th> </tr> <tr> <td style="text-align: center;">TENDER NO.</td> </tr> <tr> <td style="text-align: center;">RECEIVED BY/DATE</td> </tr> </table>	DEPARTMENT USE	TENDER NO.	RECEIVED BY/DATE
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TENDER NO.					
RECEIVED BY/DATE					

3. TAXPAYER ID NUMBER (Must Be Completed)

Social Security Number (First-Named Owner) _____ **OR** Employer ID Number _____

ENTERED BY

4. TERM SELECTION (Fill in One)
 (Must Be Completed)

Bill (Select the number of reinvestments)

13-Week ...

26-Week ...

52-Week ...

Note

2-Year Note 5-Year Note

3-Year Note 10-Year Note

TIPS

5-Year 10-Year

5. ACCOUNT NAME (Must Be Completed)

APPROVED BY

ISSUE DATE

CUSIP 912795-

CUSIP 912828-

6. ADDRESS (For new account or changes to existing accounts.)

New Address?

City _____ State _____ ZIP Code _____

FOREIGN

BACKUP

REVIEW

7. TELEPHONE NUMBERS (For new account or changes to existing accounts.)

New Phone Number?

Home _____ Alternate _____

9. PURCHASE METHOD (Must Be Completed)

Pay Direct®*
 (Existing Legacy Treasury Direct Account Only)

Checks: \$ _____

Make checks payable to Legacy Treasury Direct. Personal checks are acceptable ONLY for notes and TIPS.

\$ _____

\$ _____

Other: \$ _____

Total Payment Attached: \$ _____

CHECKS ARE DEPOSITED IMMEDIATELY

CHECK #

8. PAYMENT INFORMATION (For new account only.) **Changes? Submit PD F 5178.**

Routing Number _____

Financial Institution Name _____

Financial Institution Account Number _____

Name on Account _____

Account Type: (Fill in One) Checking Savings

10. AUTHORIZATION (Must Be Completed – Original Signature Required) **Tender Submission:** I submit this tender 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), and the applicable offering announcement. As the first-named owner and under penalties of perjury, I certify that: 1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3) I am a U.S. person (including a U.S. resident alien). I further certify that all other information provided on this form is true, correct, and complete.

Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Pay Direct:* (If using this purchase method.) I authorize a debit to my account at the financial institution I designated in Legacy Treasury Direct to pay for this security. I understand that the purchase price will be charged to my account on or after the settlement date. I also understand that if this transaction cannot be successfully completed, my tender can be rejected, the transaction canceled, and a **1% penalty assessed**. If there is a dispute, a copy of this authorization may be provided to my financial institution.

_____ Signature(s) _____ Date _____

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 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; send to the correct address shown in the instructions (PD F 5382).**

Common Registration Options

Investors in marketable Treasury securities have a broad choice of registration options under Legacy Treasury Direct® which are designed to address their needs and ownership situations. These options establish clear ownership and survivorship rights. Other options for natural guardians, custodians, IRA's, and government entities are available—for guidance, consult the Legacy Treasury Direct Investor Kit (PD P 009) or your Treasury Retail Securities Site. Remember: If you have two names in the registration and don't include a connective (and, or, or POD), we will reject the tender. Also, when using "and" in the registration, include "with right of survivorship" or "without right of survivorship." If you don't, "without" will be used when the account is established.

To register your security like this:

An account in the name of one individual.

Your name should appear the way you usually use it (with at least one full given name).

An account in the names of two people, joined by the word "and" and ending with "with right of survivorship."

This creates a conclusive right of survivorship. Both owners must authorize transaction requests.

An account in the names of two people, joined by the word "and" and ending with "without right of survivorship."

This does not create a right of survivorship. If one owner dies, his or her share passes on to the estate, not to the other owner. Both owners must authorize transaction requests.

An account in the names of two people, joined by the word "or." This creates a conclusive right of survivorship.

Either owner may authorize transaction requests.

An account in your name, followed by the words "payable on death to" or "POD" another individual or the United States Treasury (proceeds would then be used to reduce the public debt).

The beneficiary has no ownership rights prior to the owner's death. You must identify the beneficiary's status in the registration if he or she is a minor or incompetent. The owner authorizes transaction requests. No consent from the beneficiary is needed.

An account in the name of an executor, administrator, legal guardian, conservator or other representative of an estate.

You must make sure the name of the estate is adequately identified in the registration.

An account in the name of the trustee(s) of a trust.

Trusts may be created by wills, agreements, indentures, deeds, declarations of trust, or similar instruments. You must include language that adequately identifies the authority or document by which the trust was created.

An account in the name of a private corporation, unincorporated association or partnership.

You must include the full legal name and status (corporation, unincorporated association or partnership). You may reference a particular account or fund, other than a trust fund.

Select this option:

Single Ownership

Mary Benson Doe

Joint Ownership with Right of Survivorship

Elizabeth Black and Jane Brown, with right of survivorship

Joint Ownership Without Right of Survivorship

John B. Butte and Mary B. Doe, without right of survivorship

Co-ownership

James Black or Carolyn Black

Beneficiary

Jane Investor, payable on death to Junior Investor, a minor

Jack S. Jones, payable on death to Ellen H. Jones

Estate Representative

John Smith and Joseph Jones, Executors of the Will of James Brown, deceased

Trustees

Robert C. Jones and Mary E. Doe, Trustees under declaration of trust dated 9/2/76

Private Organizations

The Standard Manufacturing Corporation

Provide this:

SSN

SSN of the first-named owner

SSN of the first-named owner

SSN of the first-named owner

SSN of the owner

SSN of the owner

EIN or SSN of the decedent

EIN or SSN of the first-named owner

EIN